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COMPREHENSIVE TRAINING PROJECT

FINAL REPORT

ALBERTA, CANADA

The American Humane Association, Denver, Colorado

FINAL REPORT

COMPREHENSIVE CHILD PROTECTIVE SERVICES TRAINING PROJECT

THE DEPARTMENT OF SOCIAL SERVICES AND COMMUNITY HEALTH
ALBERTA, CANADA

BY
THE AMERICAN HUMANE ASSOCIATION
MARCH, 1983

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ACKNOWLEDGMENTS

This report is especially dedicated to the many Alberta child welfare workers, supervisors and administrators who invested so much time and energy into making the comprehensive child protection training project a success. Special acknowledgment also is given to Jules Riley, Alberta Project Coordinator, Wayne Holder, Director of the Children's Division, Sharon Christy, John Fluke, Nancy Lenda, Lisa Passaglia, Sue DuWaldt, Shelia Carlson, and other American Humane staff who contributed to the evaluation design, analysis and interpretation of data over the course of the comprehensive training project.

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I. EXECUTIVE SUMMARY.

This final report encompasses evaluation data on the comprehensive child protective services (CPS) training project conducted by The American Humane Association for child welfare workers, supervisors and administrators currently employed in the Department of Social Services and Community Health (DSSCH), Alberta, Canada. Analyses of data presented in this report strongly demonstrate the effectiveness of the training and its impact on workers' ability to actually use this knowledge in casework practice. After approximately two years of involvement of American Humane, capabilities for the entire comprehensive CPS training and evaluation effort have been transferred to DSSCH staff, who have already become involved in training additional Alberta CPS workers.

Over the course of the American Humane comprehensive CPS training project, a total of 473 DSSCH employees received a total of 83 training days (39,259 participant days) and 498 contact hours (235,554 participant hours) with the interdisciplinary faculty of American Humane. In addition, approximately 80 supervisors received 24 hours of specialized CPS supervisory training for an additional total of 16 training days (1,280 participant days) and 96 faculty contact hours (7,680 participant hours).

To promote learning and enhance program accountability, every employee participating in American Humane training received a training text covering the basic principles of child protection

casework, took pre and post-training knowledge exams, answered background questionnaires and completed surveys relating to child protection. Supervisors, additionally, were trained to assess workers' knowledge of CPS casework and their ability to utilize that knowledge in practice on a pre and post-training basis.

All sessions were evaluated by participants. Overall, employees completed more than 2800 evaluations of the American Humane presentations. Data from the evaluations, included in this report, provided a mechanism for feedback which enabled American Humane to maintain a remarkably consistent, high quality training program throughout the project.

The major findings of the evaluation of comprehensive CPS training were as follows:

1. Post-test scores indicated a significant gain in CPS knowledge as a result of training;
2. Significant post-test gains in knowledge were found for each of the content areas as well (dynamics, child development and parenting; intake, initial contact and intital assessment; legal and medical aspects; and case planning, case evaluation and casework);
3. Supervisors found that workers gained both in absolute knowledge and application of the knowledge as a result of training;

4. There were large gains in ability to utilize CPS knowledge, thus meeting an important objective of the Alberta DSSCH program to increase practice skills; and, finally,

5. Employee attitudes surrounding standards for quality CPS practice were found to be appropriate and in line with accepted professional CPS practice.

Background information revealed, among other things, that participants had had very little specialized CPS training prior to involvement with American Humane; that most staff held university degrees relevant to their work; that most workers carried moderately high to high (mixed) caseloads; and that most workers had between two to three years experience in child protection. A particulary important conclusion, drawn from analysis of the employee evaluations of the presentations given by American Humane faculty, was that sessions were uniformly rated in the top quintile, with average rankings of sessions falling between 85% and 92% of the maximal rating possible. That sessions were rated so highly can be attributed to a great extent to employees' perceptions that the curriculum was highly relevant to their needs as child protection professionals.

The Department has made tremendous strides in program improvement in child protection by providing training which was effective, by involving administrators, supervisors and workers in this training, and by recently increasing the educational

requirements for a child protection worker in Alberta. The administration, furthermore, has wisely developed the capacity to provide for this comprehensive training itself, thus establishing training as an agency priority. Those who will benefit from these efforts are not just DSSCH child welfare staff. Those who will benefit the most are those in the greatest need, the children and the families of Alberta.

II. OVERVIEW.

This is the final report of the Comprehensive Child Protection Training Project delivered by The American Humane Association (AHA) to child welfare staff in the Department of Social Services and Community Health (DSSCH), Province of Alberta, Canada. The project was designed to improve overall service delivery by training administrators, supervisors and line workers in a basic and intensive child protection curriculum, and by additional specialized training of child welfare supervisors.

Throughout the duration of the project there was extensive involvement by DSSCH workers, supervisors and administrators in curriculum design and adjustment. Curriculum and materials were carefully reviewed and adjustments made to meet the identified needs of the Department. The completed project has taken two years and was designed from the onset to incorporate the complete transfer of AHA training capabilities to child welfare personnel in Alberta. Evaluation of all phases of the project, presented here in this document demonstrates that the American Humane training project has been received well by DSSCH employees and has met its objectives of helping to enhance the quality of protection practice of workers and of promoting the transfer of training capabilities to DSSCH personnel.

III. INTRODUCTION.

Identifying training needs. In the Fall of 1980, the Department determined that training of all child welfare staff was a priority and an effective means of increasing the quality of child protection practice. The Department, at this time, was under considerable public pressure to address this problem as a result of intensive media exposure of a case involving institutional child abuse. The American Humane Association was contracted to deliver this training since it had the immediate proven capability of taking on a project of this magnitude and was already involved in comprehensive child protection and training with other agencies.

Organizational capability. The American Humane Association is the oldest national agency dedicated to the advocacy for the rights of chidren and families and the prevention of family violence. For over 100 years it has provided recognized leadership in nation-wide development of programs and services on behalf of families and neglected and abused children. The American Humane Association is a non-profit agency with its headquarters in Denver, Colorado.

As a national association committed to strengthening the family system, AHA has strong ties with social services agencies, courts, hospitals, schools, and individuals in every state, U.S. territory and in several Canadian provinces. AHA is guided by a national board of directors and an advisory board.

American Humane's Children's Division has a 17 member professional and support staff and an adjunct national faculty of 35

experts from the fields of social work, law, medicine, psychology, and education.

Americans Humane's experience encompasses a wide range of capabilities:

- Comprehensive child protective services training and evaluation.
- Assessment of practices regarding caseload management and design of case management practice.
- Review of legal criteria for program accountability and casework practice and provision of staff training on legal issues.
- Design of quantitative methods of assessment for program evaluation and training in design development.
- Design of quantitative methods for policy analysis.
- Development of tools for standardization of assessment of practices regarding caseload management and design of case management practice.
- Development of tools for standardization of information, quality control, and accountability.
- Publication of monographs, articles and books relevant to current practice skills.

Consultation and education. One of the most far-reaching programs of AHA's Children's Division has been the intensive staff development service made available to provinces, states, and counties to supplement their in-service training programs. The need for this training was highlighted by AHA's nationwide surveys of the status of child protective servies in 1967 and again in 1978, from which it was apparent that there was a need of intensive skills training for child welfare staff.

Even before 1967, AHA was involved in a program of training for

child protection personnel in state and county departments of social servcies. Starting in 1981 AHA became closely involved in comprehensive professional training of child welfare workers, supervisors, and administrators in Alberta and Saskatchewan, Canada. Drawing upon the skills and experience of a national training faculty, AHA staff have developed standards of practice and a comprehensive, coordinated curriculum for child protection and other child welfare personnel. Over the last ten years, specialized educational seminars and workshops have been delivered in every region of the United States and Canada and have reached over 25,000 workers.

In 1977, an integrated program of instruction for professional workers in child protection was developed to provide certification for child protection workers. The goal of this comprehensive approach to training was to increase agency accountability by assuring that services are being rendered in accordance with state and provincial law, policy, and procedures by personnel known to possess knowledge and skills in line with current professional standards. The specific phases of the program include:

- Adjustment of the training design and curriculum to meet state and provincial program policies and legal mandates.
- Design and implementation of management and supervisory seminars aimed at support through administrative and supervisory functions.
- Training of agency staff to prepare them to use the curriculum and associated materials for on-going educational programs.
- Basic training for all CPS workers, augmented by a field practicum.

- The application of comprehensive evaluation instruments designed to measure the project's impact and provide data for use in demonstrating program accountability.

- A final report which summarizes the training, and provides an evaluation of staff characteristics, test scores and program effectiveness.

Philosophy of The American Humane Association. The American Humane Association has a strong commitment to a humanistic philosphy of child protection which views the line worker as an integral person in helping families overcome stresses which lead to child abuse and neglect. The AHA organization is dedicated to systems improvement which enhances social services delivery to these families. In this project effort focused on improving the effectiveness of child welfare supervisors and workers by increasing knowlege of child protection practice and providing skills training relevant to planned, documented casework. Increased support of both supervisory and worker roles was sought by exposing administrators to this philosophical approach and by training the amdinistration staff itself. The tremendous investment in time and effort by the administration towards supporting supervisors and workers was noteworthy and unique in the American Humane training experience.

From the beginning it was evident that the Department and American Humane shared a common philosophical base which promoted close mutual involvement which has lasted over the course of the project. The following represents the basic premises of philosophical base upon which Amercian Humane designed the child protection curriculum delivered in Alberta:

- Child protective services are child-centered and family-focused. Although the first immediate concern is always for the child, it is critical to involve the family in the context in which help occurs. This underlines the care that must be taken in considering family-child separation.

- The child protection case is defined by two criteria: a) the child is at risk and b) the caretakers are unable or unwilling to protect the child.

- Child protective intervention consists of a balance between technical and artistic practice. This suggests that casework is a conscious, purposeful process which involves a caring, concerned, feeling practitioner.

- Child protection workers employ a specific problem solving process which is rational, analytical, and sequential.

- Child protective services are social, rehabilitative services rather than legal intervention.

- Child protective services are best when they are non-punitive and non-judgmental.

- Child protective services require reaching out to clients with aggressive, helping casework. This is based on the fact that, on the whole, CPS clients are involuntary.

- Helping is a pervasive part of the CPS process. Help is offered at intake and continues even <u>through</u> case termination.

- Child protection workers frequently are the best source of help to the client. In many instances workers need to involve other professionals to serve the case. In these situations workers perform a case management function. However, workers should <u>always</u> first consider whether they may be the most suitable service provider. This forms the basis for workers being well-armed with knowledge and skill to be the helper in a case.

- Child protection casework operates in the context of client reality and conscious behavior. This limits worker involvement to assure that the subconscious motives and psychopathological issues are referred to other professionals. In addition to defining who CPS workers will work with, this assists in the diagnostic and prognostic steps in the CPS process.

- Child protective intervention is non-authoritarian. Efforts and methods are designed to increase clients' internal motivation. The use of the judicial process is a selective intervention used minimally or as related to the law.

- The heart of child protective services is client involvement. Every step of the CPS process should be client centered. Clients are the primary source of information.

- No matter how slight, all people possess the capacity to change.

- Parents want to be good parents. Parents who mistreat their children basically love their children and can be helped to be better parents.

- Children prefer to be with their parents even when their parents have failed them.

- Most child maltreatment is not willful and deliberate, but represents parental failure and incapacity.

- Child protective services, to the extent possible, should be specialized services.

- Child protective services offer service for families and also to the community at large as reflected through the intake function.

- Child protective services are not a job for everyone. It requires people who possess desirable qualities and characteristics as specified in AHA's "Child Protective Services Standards."

History of American Humane training in North America. The American Humane Association's Children's Division has been involved in specialized child protection training for thirty years and has done training in each Canadian province and all 50 states plus several U.S. territories. AHA training has always emphasized practical skills development in child protection. Although the majority of training has been in workshops and conferences, comprehensive CPS training of the nature delivered in Alberta has been delivered by

American Humane in Saskatchewan, South Carolina, West Virginia, Vermont, Pennsylvania, Rhode Island, Ohio, Kentucky, and Nevada. In each training project special care is taken to adjust the curriculum to meet the needs of the province or state and, where possible, to transfer all training capacity to Departments to help maintain a long-term focus on improving the quality of CPS practice and service delivery. Beyond workshops and basic comprehensive child protection curriculum, American Humane has offered advanced training conferences in South Carolina, West Virginia, Arizona, and Connecticut.

The American Humane faculty. The AHA training faculty is composed of approximately 35 professionals from the fields of social work, law, medicine, psychology, child development, education and management who are among the most respected in the field. This group of experts from the United States and recently Canada has distinguished themselves in practice and teaching. They come from universities, public and private agencies and private practice and receive special preparation for the training by AHA. Training teams are selected and prepared by AHA for each content area of the training plan in accordance to the identified needs of each state and province.

IV. THE ALBERTA MODEL: DESCRIPTION OF TRAINING COMPONENTS AND PROJECT IMPLEMENTATION.

The American Humane Association undertook the actual training of child welfare professionals in Alberta in the Spring of 1981. Prior to that time the Department was under considerable pressure to respond to complaints and considerable media exposure of questionable practices in one of its institutions. Since quality of practice was at issue, the Department undertook a two-pronged endeavor to (1) increase worker and supervisor skills through intensive training in child protective servcies practice and (2) increase the educational requirements of line workers involved in child protection.

Planning for training. Considerable effort went into the planning for comprehensive CPS training in Alberta. Several meetings between DSSCH and AHA staff were held to review all training materials and the major training manual, Helping in Child Portective Services. Video tapes and films to be used in training were also shared. Adjustment of identified material was made where possible. Practice differences, including extensive revision of the legal training sessions due to the differing legal systems between Canada and the United States, were identified and incorporated into the curriculum. A result of this effort was a standardized training format which basically remained unchanged throughout the duration of the contract and of the development of a set of standardized handouts and

materials. The basic training format and handouts, with some additions, have now become part of the Alberta training unit's core curriculum presentations.

After meeting with child welfare administrators and supervisors in DSSCH which determined there was a "goodness-of-fit" between Alberta's and American Humane's philosophical base of child protection and the proposed AHA training model, The American Humane Association convened a meeting with its faculty and selected DSSCH staff to continue the process of familiarization with Alberta's CPS content issues. Feedback which went to the American Humane faculty for their study included materials on provinicial policy and laws, current cases in the public media, statistics pertinent to Alberta and DSSCH. By the first training session in 1981 the American Humane faculty were familiar with the particular nature of child protective servcies in Alberta. Following the first two groups of training that Spring, final adjustments were made in handouts, actual training material, training methods, case examples, and evaluation instruments, largely as a result of on-going feedback from the administrators and supervisors who were involved in the first two groups (or waves) of the three-week CPS curriculum experience. Training in Alberta continued to reflect needed adjustments when new problems were identified or new issues raised.

The final design for the Alberta training project contained a number of elements incorporated to maximize the impact of the training at a variety of levels. While child welfare workers and

supervisors received the most attention and were singled out as the primary focus for support, district office managers, regional and central office child welfare administrators were also exposed to the comprehensive training effort in management seminars and in actual training themselves.

Components of comprehensive training. The components of the project, their content and purposes are described in this section of the report.

(1) Management Seminar. Training effectiveness frequently reflects the degree of investment and involvement evidenced by administration and management. Because a project of this magnitude had the potential to affect program methods and practices in the Department, a two-day management seminar was offered to brief managers and administrators on the details of the contract; the underlying philosophy of the curriculum; the schedule for staff participation and related details. This session was attended by the Department's district office managers, appropriate central office program specialists, and the director of child welfare. American Humane presented the project briefing and overview in addition to a discussion of philosophy and standards for parctice in child welfare. Group discussions considered issues related to management's role in training and program implementation as well as unique issues and problems in child protective services in Alberta.

(2) The Core Curriculum. The core curriculum was delivered over three separate weeks of training. The rationale throughout was

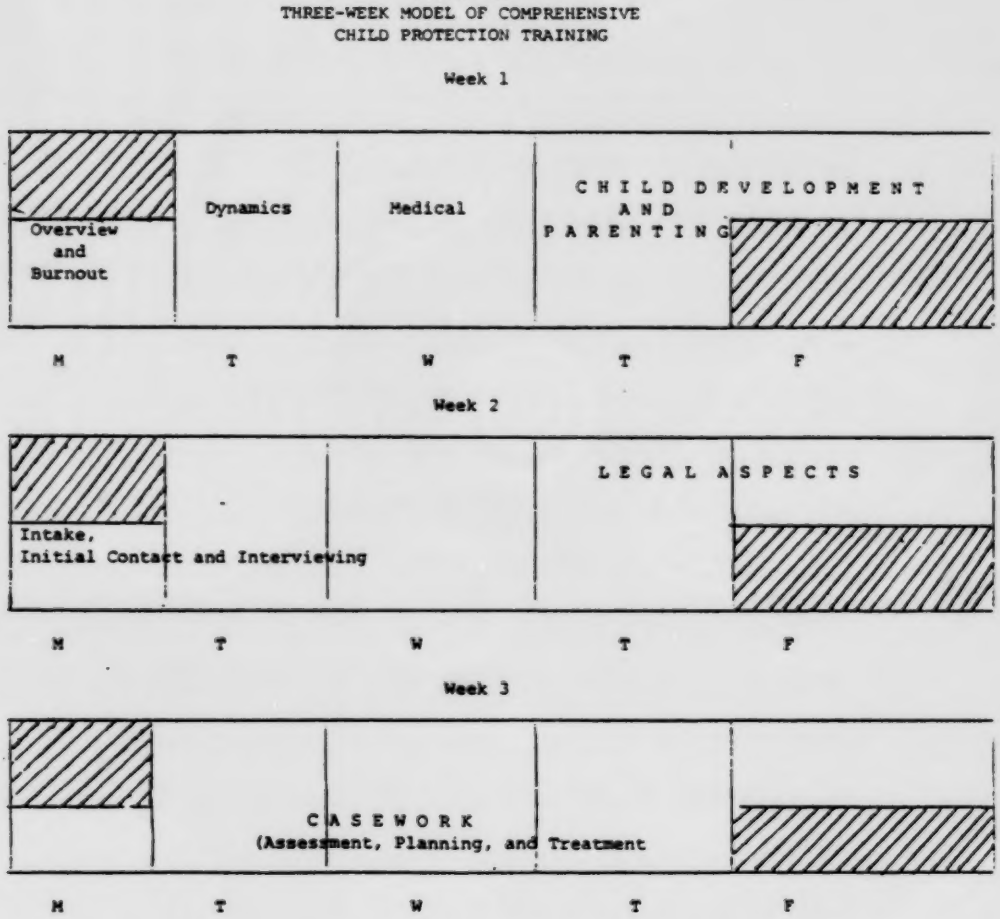
to provide for field coverage in local offices by not extending any individual staff member's continuous time away from the office beyond one week. Workers were expected to complete a field practicum experience between each of the three weeks of training.

The core CPS curriculum is intended to encompass the knowledge and skill base required to provide effective direct service. The program was designed in accordance with the child protection case process which is indicated in Figure 1. Although the curriculum was not designed to produce accomplished practitioners at the conclusion of training, it was expected that participants would be provided a common language base, means of thinking about cases, decision-making and solving problems.

The number of DSSCH employees (CPS workers, supervisors and administrators) participating in the core curriculum training who were evaluated was 473, representing a total of 83 training days (39,259 participant days) and 498 contact hours (235,554 participant hours) between employees and faculty members of American Humane. These numbers include contact hours through Wave V, only, prior to the AHA-DSSCH co-training wave (Wave VI). Of the 473 trainees, 24 were administrators, 92 were supervisors and 357 were workers. Supervisors received 16 additional days (1,280 participant days) and 96 contact hours (7,680 participant hours) of training by AHA.

The core curriculum training format was designed to keep repetition to a minimum, to promote continuity by building on each session's prior knowledge, to increase experiential learning and to

FIGURE 1:
THREE-WEEK MODEL OF COMPREHENSIVE
CHILD PROTECTION TRAINING



emphasize casework technique in the content areas as described below.

(a) Overview and Burnout. The overview component of the curriculum was added beginning with the first worker wave to provide a conceptual framework for the employees encompassing upcoming training. The rationale for training was explained, the history of the project, the relation between the casework process and sequencing of the curriculum was emphasized, the philosophical base of child protective services was explained, and each training session and faculty presenter were briefly described.

Time was made available to answer any concerns of the employees, including those relevant to facilites, possible evening sessions, current problems in the field, the evaluation, and the practicum.

Following the overview of the comphrehensive core training, a presentation on burn-out as it affects workers in child protective services was made with an accompanying slide presentation. The focus of the burnout discussion was on the behavior and symptoms of burnout, the causes of burnout in CPS, how symptoms of burnout tend to repel rather than encourage support from colleagues, and steps individuals can take to prevent or minimize the symptoms of burnout.

(b) The Dynamics of Child Abuse and Neglect. The foundation for understanding the phenomena of child abuse and neglect was provided by emphasizing the common dynamics in parents and children where there exists problems in:

- physical abuse
- physical neglect
- emotional abuse
- sexual abuse

In this session these dynamics were presented in the context of family interactional patterns. A model was presented to provide a conceptual framework for better understanding the dynamics of child abuse and neglect (World of Abnormal Rearing, Helfer, 1974). Some of the topics covered over the course of the workshop were (1) the battered child syndrome, (2) the relationship between stress and violence, (3) adolescent abuse, (4) the difference between neglect and poverty, (5) the apathy-futility syndrome (Polansky), (6) failure to thrive, (7) role reversal, (8) ranges of behavior, (9) impulsiveness and immaturity and (10) primitive defense mechanisms. In addition to a film, several studies were presented in small group exercises throughout the session. The dynamics which were examined became a foundation for later content on casework intervention.

(c) The Medical Aspects of Child Abuse and Neglect. This training module presented content on the medical aspects of child abuse and neglect. Through extensive use of medical slides, each type of child abuse was examined with specific interpretation of its medical dynamics and the responsibilities of the health profession. Participants received information on how to interpret different physical injuries and how to involve health professionals in their work. Specific information covered in this session included:

- the role of the physician;
- the reluctance of physicians to become involved in child abuse and neglect;
- the medical assessment;
- the medical diagnostic facts;
- the differential diagnosis;
- medical definitions of maltreatment;
- the medical responsibilities in sexual abuse cases; and,
- the interface of the roles of social work and medicine.

(d) Child Development and Parenting. Child development was taught from the standpoint of developmental dysfunctions which may occur during the various ages of development when parenting is inadequate, inconsistent or abusive. Developmental stages were taught from the framework provided by Erikson which is seen as especially relevant to children raised in homes where maltreatment may have occurred or may be occurring.

Parenting was presented in terms of a model of parenting styles which takes into account how inadequate, hostile, or neglectful parenting can affect children. Needs of various members of the family were viewed as being in potential conflict and the importance of this information to the caseworker was emphasized. Special emphasis was given to adolescence issues. Group exercises in assessing child development and in identifying appropriate parenting techniques were conducted and discussed by the group.

The purpose of the child development and parenting session was to increase awareness as to its necessity in the CPS assessment and treatment process as well as increasing specific knowledge. Areas covered included all developmental stages (including prenatal), working with adolescents, conflict of needs between parents and their children, parenting sytles, types of discipline, effective alternatives to "spanking", and communication.

(e) Intake, Interviewing and Initial Contact. In the second week of training, material was presented relevant to the intital intervention with clients. General topics covered included interviewing in child protection with discussion on values, self awareness, and communication as well as special emphasis on specific interviewing skills development. Exercises were conducted on non-directive listening techniques, asking questions, giving advice, recapitulation, confrontation, supression, repetition, giving direction, focusing, the use of encouragement and the use of explanations. Interviewing children in general and interviewing the child sexual abuse victim were among topics covered.

The role of the intake process in receiving the referral was clarified in terms of the purpose of intake and barriers which are likely to affect effective intake calls. Types of information required of adequate intakes were discussed which included the appropriate and necessary agency response to the person making the referral (the reporter), assessing the motivation of the reporter, how to manage anonymous reports, and specific decisions which need to be made at intake.

The final portion of the initial intervention segment involved making the initial assessment in families involved in child abuse and neglect. Material covered included the very basics such as worker introductions to the more complex issues such as the need to involve the client in all decisions despite sometime low client motivation, the appropriate use of authority, and the incorporation of a predetermined, planned process under which certain decisions must be reached.

In dealing with the parent, employees were prepared to deal with the potentially dangerous client and were trained to recognize signs of danger. Exercises on written intakes and various role plays were interspersed throughout the session with group review of each activity. The final portion of the day and a half session include preparing children for emergency placement in the event it is necessary. Criteria for removal, preparing the child, working with collateral professionals in other disciplines and parental involvement were covered.

(f) Legal Aspects. The day and a half session on the legal aspects of child abuse and neglect was oriented toward increasing the social worker's perspective and philosophy about the court's importance and distinctive role in child protection. Since the legal area was identified as the session which required the most adjustment from the standard Amercian Humane curriculum delivered in the states, considerable effort was expended to acquaint faculty with the legal base under which Canadian law exists. An attorney for the Department met with the American Humane legal faculty to

convey policy and prodecures relevant to the Department, the court system in Alberta, and the authority of child welfare workers in apprehending children. American Humane legal faculty and staff also visited the Family Court in Edmonton and Calgary, met with Albertan judges, and reviewed the legal curriculum with administrators and supervisors. The final adjusted curriculum for the legal session incorporated the basic philosophy and information needed to effectively work under the Child Welfare Act and departmental policies, toward the end of enabling DSSCH workers to more effectively invoke the judicial process when appropriate.

The specific content of the session concerned the broad perspective of the Family Court System in Alberta, how to invoke the judicial process, basic legal procedures and concepts, and the role of the CPS worker during the legal process. The relatively informal nature of the Family Court was presented as providing latitude for attorneys in the development of court strategy and for potentially providing additional protection for the child in minimizing the adversarial nature of court. The standard of proof required in criminal cases of abuse or neglect and in termination of parental rights was discussed fully.

There were several legal points CPS workers were asked to consider in making case assessments, including decisions as to when to invoke the authority of the court, how to take temporary wardship of a child at risk of maltreatment, how to fully document the worker's efforts to help the family in the event the worker must

testify in court, how to complete documentation to protect the worker against allegations of malpractice, and how to present evidence which is legally sufficient.

Throughout the legal presentation the role of the CPS worker in relationship to attorneys and the court was clarified. In addition permissible and impermissible contacts with the court were discussed.

The final legal topics covered direct and re-direct examination, cross and re-cross examination, rights of due process and rules of evidence.

(g) Child Protection Casework: Assessment, Planning and Treatment. The entire third week of training explored practice issues in depth with regard to diagnostic assessment, case planning and treatment in cases of child abuse and neglect. The casework material built on the knowledge base provided in the first two weeks of training and was provided in relatively small groups of only 25 to 30 individuals. Role play, case assessments, video presentations and asssessments, group exercises, lectures and discussions formed the methods of presentation. The session began with a review of the case process, how it has related to the curriculum sessions already completed and how the casework week represented the culmination of this process. Time was spent on client assessment, its purpose, different types of assessments and definitions needed for a common language base. The information required in assessment was reviewed. A model was presented for analyzing and understanding child

protection families and individuals, various common defense mechanisms which can be diagnosed were reviewed, and behaviors which are relevant to dysfunctional individuals were discussed. The importance of self-esteem needs was discussed in terms of its treatment implications. Employees were given the opportunity to complete individual client assessments and discuss these with the group. The concept of communication was dealt with in detail with special consideration on how to deal with hostile, manipulative, avoiding, and denying clients.

Case planning was emphasized throughout the casework week. The following areas were covered:

- The diagnostic statement
- Relating diagnosis to goal setting and case plans
- The purpose of case planning
- Case planning as a means of treatment
- The rationale for planning
- The need for client involvement
- The structure of plans
- Criteria for goal setting
- Selection of referral services

Presentation of material on case planning was enchanced through individual exercises in which goal statements were written and discussed.

The treatment portion of the casework week helped to differentiate the role of worker as a helper as opposed to a worker

whose only role is to refer clients to other services. Principles and rules of treatment were discussed and a variety of treatment techniques practiced. An extensive role play involving treatment issues was conducted.

The final content delivered in this training session centered on case closure or termination, an area which often is identified as being overlooked and for which workers often lack adequate practice skills.

(3) Supervisory Training. Four weeks of competency-based training for child protection supervisors occurred over the course of the training project. The sessions involved approximately 20 supervisors each, small enough to enhance the experiential nature of the training design. Overall these approximately 80 supervisors received an additional week (24 hours) of specialized CPS supervisory training for a total of an additional 16 training days and 96 contact hours between CPS supervisors and American Humane faculty.

The supervisory training was based upon three assumptions. First, supervisors were trained that it was essential they serve as facilitators of their staff. Second, supervisors were felt to need to have an in-depth understanding of interpersonal helping skills, casework strategies and techniques in child protection services in order to fulfill their role as facilitators and serve as a resource to workers. Third, especially since supervisors generally have little experience in preparing and conducting training and case

consultation, it was believed necessary that they receive training in these areas.

These assumptions formed the basis of the learning objectives for supervisory training. The training combined content presentations and experiential exercises. Emphasis was placed on worker evaluation, teaching and case conferencing. The objectives of the specialized CPS supervisory training were (1) to identify supervision as helping; (2) to impress upon supervisors the need for their personal involvement in supervision; (3) to increase the number of supervisor-worker interaction encounters; (4) to emphasize the connection between evaluation and helping; (5) to develop the capacity to maintain standards of performance; and (6) to prepare the supervisors to conduct the training practicum. Among the issues developed in this session were the importance of self-awareness, certain personal characteristics that enhance and interfere with supervision, an understanding of the type of person most likely oriented to be a supervisor, the use of power and authority, understanding the supervisee, role conflict in supervision, and barriers to effective communication in supervision.

Supervisors were required to complete a personal competency assessment in which previously identified skills and techniques were practiced and reviewed. In addition, each supervisor developed a short teaching vignette incorporating the helping process described in the sessions which was critiqued by the person, the group, and the American Humane faculty.

Competent decision-making in case supervision is critical and the points in the CPS casework process where the supervisor would share in decision-making were emphasized. Discussions followed which discussed variations in worker independence in decision-making and variations in supervisors' consultation styles and techniques.

Finally, there was a case supervision demonstration toward the end of the week in which two of the supervisors from the group worked with a worker who was invited to present an issue-oriented case which required supervisory help. All participants were able to observe, reflect and discuss this demonstration, with the objective of enabling them to incorporate much of what was learned into their own supervisory practice.

Finally, the rationale for the core curriculum practicum was presented, forms provided and reviewed, and the importance of the practicum experience stressed. The responsibility for completing the practicum package for each CPS worker was given to the supervisor as part of an ongoing role as evaluator and facilitator.

(4) The Field Practicum. It has been American Humane's experience in training that formalized classroom training frequently loses its effectiveness because participants fail to use what they learn in training to change their job behavior. In short, they fail to apply what they have learned. In part this problem is related to supervisors' reluctance to implement their teaching responsibility, particularly when faced with strong competing demands for their time and emerging conflicting priorities. The field practicum was

designed to address this problem and to enchance the core training by helping the worker and supervisor bring together what the worker learns from the core training and what the supervisor learns from the supervisory training. The practicum was designed to make both supervisors and workers accountable for altering their job behavior in accordance with how they had been trained.

Following each week of the core curriculum training, supervisors and workers were instructed to jointly identify a training concern or concerns related to the content of the previous week of core training. Teaching objectives and a teaching plan were to be set and implemented during this time and prior to the next week of core training (a minimum three-week interval). Pre and post training worker performance assessments, designed to determine growth or change in skill application and knowledge, were an integral part of this evaluation process. The following flow chart, Figure 2, represents the overall scope of the practicum, the evaluation instruments, and how these were intended to have been sequenced in conjunction with the core training.

(5) The Comprehensive Evaluation. The testing and evaluation component of the training effort was designed to provide meaningful performance data that would be useful in determining the impact of the training as well as in targeting future staff development efforts. The evaluation can be viewed as enabling enhanced program accountability by documenting the level of performance by supervisors and workers in the various content areas of the casework

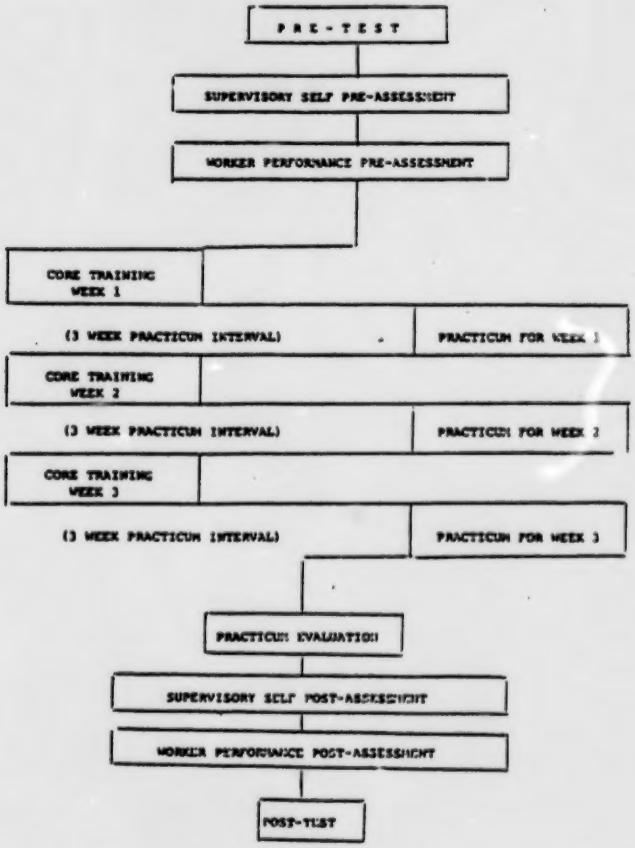
FIGURE 2:

AMERICAN HUMANE

COMPREHENSIVE TRAINING IN CHILD PROTECTION

ACTIVITY FLOW CHART

This activity flow chart represents the appropriate sequencing for a three week model of the comprehensive training session with each stage of the comprehensive evaluation. The evaluation consists of (1) pre and posttest of curriculum content, (2) pre and post supervisory self assessments, (3) pre and post worker assessments, (4) a practicum following each week of training for each worker, (5) and a practicum evaluation to be completed by both the supervisor and the worker.



process as well as providing information on the effectiveness of training. The design of the evaluation is described in detail in the following sections of the report. Components of the evaluation included background questionnaires on all participants, selected surveys, pre/post knowledge examinations on the core curriculum, pre and post-training worker performance evaluations by supervisors, pre and post supervisory self-assessment instruments, worker practicum documentation, and evaluations of the practicum experience by both supervisors and workers.

(6) Transfer of Training Capacity to the Department. An integral and planned part of the comprehensive training and evaluation project conducted by The American Humane Association was providing the capacity to have the entire training and evaluation project transferred to the Department of Social Services and Community Health at the end of the contract. To accomplish this American Humane worked closely with staff at all levels to ensure a continual and on-going commitment to the intensive practice-oriented CPS training and evaluation. Over the course of the contract American Humane met with various committees and individuals responsible for maintaining a commitment to training and evaluation. Because of circumstances surrounding reorganization within the Department, it was often difficult to maintain appropriate continuity for designing the evaluation transfer and analysis and setting up mechanisms for ensuring quality teaching. Over time there were two committees and five different DSSCH staff members

responsible for overseeing and monitoring the evaluation and teaching components of the curriculum. Despite the potential for discontinuity expressed as a result of the rapid change thrust upon programs within the Department, the ongoing management of the project was fairly well maintained, primarily because of the strong personal and professional commitment of dedicated staff within the Child Welfare Branch. Once training units were established the process of transferring the American Humane curriculum, materials, and procedures for evaluation analyses became possible as specific individuals assumed responsibility to maintain each component of the project.

(a) Training of Trainers. American Humane has a strong investment in the selection of individuals who carry on the teaching of the AHA child protection curriculum. Besides a commitment to the field, a strong personal humanistic philosophy about the value of clients, and attitudes which are consistent with the helping approach advocated by American Humane, it is believed that faculty delivering the CPS comprehensive program should also possess:

- An acceptable educational background;
- Experience in the field of child protection;
- Success in teaching;
- Characteristics and behavior which serve as a role model for training participants; and
- A belief in the value of evaluation of staff and programs as exemplified in the training package.

In Alberta there eventually emerged a full time training staff which was designated to work within training units located in both Calgary and Edmonton. In addition to the training units' full time staff, there emerged a small "extended faculty" from the CPS field, from law, and from medicine in Alberta who were trained to deliver components of the curriculum. A full time employee was assigned the primary responsibility for the evaluation effort.

There were two meetings involved in the training of Alberta faculty: in the first, material was adjusted to take into account the experienced nature of the Alberta core trainers and the special needs of the Alberta training units; in the second, material was presented by American Humane faculty and an actual intensive "hands-on" training experience took place in which individual training vignettes were delivered by Alberta trainers and critiqued.

The objectives of the second session were to increase the Alberta trainer's awareness of his or her role as a trainer, to review the training expectations of faculty and workers, to increase participants' skill in planning and implementing training designs, to increase the Alberta faculty's working knowledge of the core curriculum, to consider the proper choice of training methods, and to generally prepare the faculty for taking over the responsibility of the comprehensive training.

Material covered by American Humane faculty at this workshop addressed the anxiety of training; the humanistic approach to training; the need to maintain an employee-centered, participatory

training program; training barriers usually encountered; characteristics and qualities of good trainers (emphasizing that the majority of these traits can be learned); the need to maintain a facilitator role; awareness of the trainer as a role model; and the necessity of thorough planning and on-site coordination. Of the available methodologies discussed, special emphasis was given to the appropriate use and structure of role play experiences, when to use the lecture method and how to successfully run small group exercises.

A self-administered test was provided for the Alberta trainers to increase their awareness of their attitudes toward people, perceptions of themselves and how these perceptions match those other persons. Time was spent considering how to effectively handle potential "problem trainees", including those who refuse to participate, who believe training is "unnecessary for them", or who get so involved they distract from the focus of the particular training session.

(b) Co-Training: The Implementation Process. Following the week-long training of trainers' session in Alberta, the Alberta faculty and the American Humane faculty groups met to coordinate the sixth wave of worker taining. Co-training was designed such that one AHA faculty member was paired with each member from the Alberta faculty for specific teaching components encompassing the entire three-week curriculum. The purpose of this joint meeting was to acquaint faculty with each other's comparable teaching styles and

methods, to identify responsibility for material for actual presentation, and to focus on the in-depth questions and issues which were anticipated in the upcoming training sessions. Time was made available at this meeting to develop notes, agendas, decide on standard handouts, to select films and video tapes, and to decide on methods. Team presentations were made to the joint AHA/DSSCH faculty with regard to the detailed content of each training session which had been developed. Material was consequently reviewed and feedback given. An important consequence of this meeting was to enable the entire faculty to learn which material would be presented in each segment thus enhancing their working knowledge of the curriculum, adding continuity to the sessions and eliminating any redundant material. A strong sense of group identity and purpose clearly emerged from this meeting.

Actual co-training of the CPS comprehensive curriculum began in the Fall of 1982 with two groups of approximately 25 trainees each. The three-week model was maintained and DSSCH staff and AHA faculty taught all the practice areas such as dynamics; child development and parenting; intake; initial contact and assessment; and treatment and the casework process. Local attorneys and pediatricians carried the legal and medical sessions within the curriculum. Evaluation of training, including the practicum, was taken over entirely by the Department, beginning with Wave VI, the co-training phase of the project.

(c) Technical Assistance in Training. The final phase of the training contract involved only the Alberta faculty in delivering the core curriculum with American Humane staff on-site for needed consultation. As with the previous group of trainees, Wave VII was limited to two groups of about 25 participants each. The AHA staff observed each training session and were available for consultation by Alberta staff to answer questions, identify potential problems, and to monitor the relevance and standardization of materials before and after sessions (and during breaks). The sessions on dynamics, child development and parenting, the intake sequence, and the casework sequence were given primary emphasis for feedback. The medical and legal sessions were presented by local preofessionals, each prepared by the Alberta training unit staff as part of the extended faculty.

IV. PURPOSES AND DESIGN OF THE ALBERTA TRAINING EVALUATION.

Purposes of the evaluation. The training of workers, supervisors and administrators is always a major undertaking representing a substantial commitment of resources. Such an effort must be evaluated in order to assess the gain in knowledge and skill on the part of those who participated in the training. In short, an evaluation enables one to see what, if any, difference the training has made and in what areas. It can also provide a profile of staff characteristics which can be useful in planning future training or staff development efforts. These purposes are best served by a variety of pre and post measures of knowledge, skills, attitudes and perception; by an understanding of the levels of education, experience and current responsibilities of the employees; and by a formal assessment of the individual segments of the curriculum by the employees.

The evaluation taken as a whole can be used to increase program effectiveness and accountability in determining which training areas may need increased or decreased attention in the future, how well employees are currently prepared for the difficult job of child protection in Alberta, and what decision might be necessary to implement a better understanding of the "state of the art" of practice in Alberta.

Design of the evaluation. The evaluation component was designed to provide a comprehensive measure of the project's impact as well as providing data for use in demonstrating program accountability for

the child protection program in Alberta. The evaluation was designed to measure and provide a detailed analysis of the training conducted. The evaluative measurements provided an assessment of staff competence in significant CPS-related areas and a picture of Alberta's child welfare staff before and after training. The intergral testing and evaluation component of this package may be valuable in providing the Department with a uniform approach to personnel evaluation.

More specifically, the evalutaion instruments were designed to evaluate performance of Alberta child welfare staff as related to CPS by measuring:

- Whether workers, supervisors and administrators demonstrated increases in CPS content knowledge and practice skills designed to enhance the quality of decision-making and service delivery within child protective services;
- Whether supervisors showed an increased understanding of their administrative, educational and supportive function vis-a-vis workers;
- How employees evaluated trainers with regard to their effectiveness in a number of areas;
- The effects and experiences of workers and supervisory personnel in integrating a field parcticum experience with the content and practice knowledge conveyed in the training; and,
- Which barriers to implementing effective practice are perceived by supervisors, administrators and workers at the end of training.

All trainees were given non-identifying members for each evaluation instrument to enable American Humane to identify changes in scores on pre and post-tests and to enable American Humane to match supervisors with workers, determine in which regions the employees were located and, if applicable, to trace whether the test was a pre or post-test. Numbers also were given so that workers and supervisors could be distinguished and compared for certain purposes. All individual scores were held strictly confidential by The American Humane Association and were released only to the individual addresses designated by the employee. Confidentiality was maintained to assure the employee the testing procedure would not become part of any provincial evaluative process or supervisory knowledge. The decision to maintain confidentiality was made to enhance the probability that the evaluation procedure itself would become an additional part of the professional learning process for each employee by identifying areas of professional strength and weaknesses the individual could work on.

Description of Evaluation Instruments.

(1) Pre and post-training worker performance assessments by supervisors. In order to measure the degree to which workers were able to integrate their learning of the core curriculum CPS practice, American Humane developed a worker performance assessment package to be completed by supervisors for their workers before and after training (see Appendix D). Assessments were designed to rate workers on their knowledge in specific content areas and their

application of that knowledge in their practice, according to specific standards.

For example, in the area of child development and parenting, standards included: (1) the worker's knowledge and application of the material covered in the core curriculum segment on child development and parenting; (2) other child development/parenting content for which the worker was accountable; and (3) cases in which child development/parenting were primary issues.

Supervisors were also asked to assess workers on their level of knowledge and how they applied it in practice. The ratings were based on a scale of one to five, with five being the highest level of mastery. A percentage scale was also provided so that supervisors could locate workers between levels of mastery. Although this assessment rating relied on supervisory judgment, training on the use of instruments occurred in supervisory training and the following definitions were provided to promote accuracy and consistency.

Level 1 (0%).

Insufficient Knowledge: The worker is unfamiliar with most general CPS content.

Example:
1. The worker does not know the functions of intake.
2. The worker does not know the causes of symptoms of child abuse or neglect.
3. The worker does not know the CPS process.

Unacceptable Application: The worker's approach in working with cases/families is devoid of purpose and rationale. The worker does not know what he is doing.

Example: 1. When approaching a family, the worker lacks thoroughness, confidence, direction and control.

2. The worker's documentation is superficial and "storytelling" in nature.

3. The worker misses the dynamics of the situation.

4. The worker has poor attitudes and is unreliable.

Level 2 (25%).

Limited Knowledge: The worker is familiar with general CPS content, but lacks an in-depth understanding of that content.

Example: 1. Academically a worker may understand child development in very general terms (i.e., children porgress through sequential stages); however, the specific concepts and behaviors which can be applied to the job are not known.

2. The worker understands the broad function of the CPS process (intake,

assessment, planning, and treatment) but does not know the specific tasks in each step of the process and how to employ those tasks.

Marginal Application: The worker completes the most basic functions. Case management and casework are by trial and error. When done successfully, the worker cannot explain why or how to duplicate it.

Example:

1. The worker tries different approaches with clients, and when one finally works, is unable to understand why, and may be unable to use the approach again.
2. The worker determines that a child is at risk on the basis of feeling rather than of reason.
3. In case planning the worker inappropriately substitutes services for goals, e.g., a goal is "to visit the client."
4. While the worker completes all the basic tasks in intake, they may or may not be done properly.

Level 3 (50%).

Adequate Knowledge: The worker is familiar with general and specific CPS content although sporadically relates such knowledge to case concerns.

Example: 1. The worker has a thorough conceptual understanding of the dynamics of child abusers but is unable to consistently identify the presence of those behaviors in clients.

2. The worker is well versed in the CPS process but is inconsistent in translating knowledge into practice.

Adequate Application: Half of practice is planned, purposeful, conscious and based on knowledge and a rationale. Half of practice is intuitive or trial and error in nature.

Example: 1. A worker has as many successes as failures.

2. Mistakes are not likely to result in a major problem (like a child's death).

Level 4 (75%).

Above Average Knowledge: The worker has a good grasp of all CPS content, is able to see its relationship to practice and uses knowledge in work 75% of the time.

Above Average Application: Work is characterized by the consistent application of CPS content; work is planned, purposeful, and the worker demonstrates control of cases; worker actions are based on a conscious rationale.

Example: 1. The worker prepares for interviews, deciding in advance on their purpose, process and appropriate techniques, based on client assessment. Then, the worker successfully carries out the interview.

Level 5 (100%).

Superior Knowledge: The worker is well versed in CPS content, in research, in other social work and psychological literature and theory, and has a knowledge of practice methods. The worker is able to discuss and transmit knowledge to others.

Superior Application: Work is characterized by the successful application of CPS content and the use of innovative, creative methods of practice. Success is at the highest level. The worker is able to assess and treat behavior spontaneously, as well as in the long term. The worker is able to conceptualize, discuss and transmit his or her own practice style and competence to others.

In addition, supervisors were asked to provide six statements which were conclusive and justified their ratings. Statements were to adequately cover both knowledge and application ratings. If

supervisors were unable to accurately assess a worker in a particular area, they were asked to simply circle or state the reason, e.g., the worker did not perform a particular functon, was new, or the superviosr was unfamiliar with the worker's knowledge or practice in the particular area. Since assessments on approximately two-thirds of workers pre-assessments and even fewer post-worker assessments were not returned to American Humane, analysis of this data is limited to general comparisons only.

(2) Pre and post core curriculum knowledge tests. An objective multiple choice core curriculum knowledge test was taken by workers, supervisors, and administrators before and after training. Based on feedback and the results of the test administered to supervisors and administrators in the Spring of 1981, the test was revised in preparation for the five groups of worker training scheduled for the following Fall. For both tests, material focused on whether trainees were knowledgeable in a number of content areas related to child protective services. These tests measured the degree to which trainees were aware of the "state of the art" of child protective services as determined by American Humane.

More specifically, questions focused on the following content areas: the dynamics of abusive and neglecting families; child development and parenting; intake, initial contact and interviewing in child protective services; the medical and legal aspects of child protection work; and, the assessment, planning and treatment (casework) of families in which intervention by social services is

necessary. Questions on both the pre and post-tests were designed to measure knowledge in a weighted fashion in accordance to the amount of time spent on each topic in the curriculum. In other words, because assessment, planning and treatment (casework) were most heavily emphasized in the training, there were more questions related to these content areas. Other areas emphasized in the tests (and in the training) were child development and parenting, and intake, initial contact and interviewing. Persons taking the tests were given a selection of responses from which they chose correct answers.

Pre-tests were administered before the onset of training, and post-tests were administered following training and the practicum component. Therefore, it was assumed that worker performance on the post-test would be determined in part by the classroom content learning and the actual application of this learning in the field. For supervisors, it was also assumed that some of the knowledge gain reflected in the post-test would be due to the specific supervisory training component as well as the core curriculum content training. Administration of the pre and post-test packages varied over the course of the project. For the administrators and supervisors in the first two waves of training, the pre-test was administered in a central location several weeks in advance of training, and the post-test was administered centrally approximately three to four weeks after the final week of training. Responding to management concerns, a new procedure was developed in anticipation of the first

worker training in the Fall of 1981 for administration of the tests. Initially it was decided that it would be feasible to administer all pretests the day prior to the first training session and workers could be available on-site for this purpose. This decision coincided with the observation on the part of American Humane and DSSCH staff that there were additional components, an overview of the entire training and a discussion of burn-out, which needed to be added to the curriculum to enhance structure and continuity for employees. Pretesting for the remainder of the project did occur on the first morning prior to the first complete training session (dynamics).

Post-testing was a more difficult problem to resolve as it was the experience of American Humane that administration of the post-test on the last afternoon immediately following the final week of training (obviously the most economical and "convenient" time) would potentially interfere with learning during the casework week. In two states where the post-test was given in this fashion, AHA faculty reported that employees were not attending sessions (or were not attentive in the session) because they were studying for, or preoccupied with, the post-test. To advert this from occurring in Alberta, especially since the casework week is so important and it is the culmination of the entire CPS curriculum, other methods of post-test administration were first attempted. The first approach was to train administrators of district offices to administer the post-test to workers who had just completed training. Tests were

sent in sealed envelopes with coded numbers to each office for the worker to complete. The completed exam was itself sealed by the worker and mailed to American Humane. Tracking of which tests were not yet completed fell upon a single DSSCH staff member who spent considerable effort and time reminding offices which tests needed to be administered, and through American Humane determining which individuals had yet to take the exam. The process was burdensome and completion rate in the post-test was considerably less than anticipated.

The next approach to administration of the post-test was initiated by the training units once they were in operation. Training unit staff personally administered post-tests to all employees in each local office in the province following training. This method was effective and rate of return was moderately high, but it was not reasonable for all waves of training. It was only possible, in fact, to administer post-tests in each local office even once by this method because staff of the training units had other purposes to be accomplished at the local level. The last method of administration of the post-tests tried, for Worker Waves IV and V, was to administer the post-test the final afternoon of training. Despite American Humane concerns that this would interfere with the learning process during the casework week, and would not give employees the opportunity to study, there was very little adverse feedback from employees other than the expected observation that they were tired and not highly motivated. Post-

test return was higher for Waves IV and V than for any of the other waves of training.

This obvious confounding in post-test administration, in method as well as timing, was not easy to assess in terms of its impact on post-test scores. Differential administration, differing periods of time between the last training day and administration of the post-test, differing motivational levels of employees given the method of administration and/or person administering the exam, changes which may have occurred in the Department that affected one particular group of employees more than another all work to possibly bias scores. The analyses of pre and post-test data, as a consequence, were performed not only on employees overall, but also for each wave of training. The one factor of potentially low employee motivation to study or achieve on either the pre or post-test can only be surmised. Based on the fact there would be little reason to study just for the post-test, other than internalized needs for professional growth, one might suspect motivation to achieve would be fairly low. This factor would cross all training groups given the evaluation design.

Beginning in the Fall of 1981, through collaboration with DSSCH committees and various individuals, it was decided to use essentially one multiple choice test with items ordered differently for the pre and post-test for all waves of training involving workers. This design necessitated the use of a control group to assess any test/retest effects which might come about simply because

the material was somehow familiar to individuals on the post-test. The appropriate control group is one matched in terms of background and job experience, in other words, child protection staff. Over the course of the evaluation, and partly because of changes in the Department and staff, it became apparent that this CPS worker "control group" would not become available. Those involved with the evaluation continued to feel the need to test for these test effects with an Alberta control group, however, and in the Spring of 1982 a selection of workers from Income Security was identified in both Calgary and Edmonton who would be willing to provide information on the test/retest effects. This group, obviously, differed from child protection staff in current work responsibilities although many of the group had had prior CPS experience or felt they had some CPS knowledge. The important purpose of this control group was to determine if there was a positive gain from the pre to post-test without any intervening training, with Alberta participants taking the test. It was hypothesized there would not be a significant pre/post-test gain for the control group and that there was a possibility of lower pre-test scores for the Income Security group compared to groups of CPS workers. Both pieces of information were felt to be important to understanding the overall effects of the training on CPS workers in Alberta.

(3) The training practicum and assessment instrument. The practicum component (see Appendix E) of the child protective services training program was designed to provide a continuing

learning experience through the application of the knowledge gained in the core curriculum to actual CPS cases. The practicum was designed to consist of, at the minimum, a concentrated three-week learning experience immediately following each week of the core curriculum training.

During the practicum, supervisors and workers were to jointly select one or more aspects of the previous week's core curriculum training as areas for applied learning. Although teaching from an active case or cases was identified as preferable, any medium or resource agreed upon by the supervisor and worker could be employed (e.g., video tape or role play).

Through the practicum experience it was expected that competence in practice would be reinforced and expanded and that the practicum would encourage the use of planned and thoughful casework or supervision methods.

On the first work day after the first week of training the worker and the supervisor were instructed to meet to decide the area(s) upon which the practicum would focus. This same process was to recur immediately following each additional week of core curriculum training.

The identified learning area(s) of the practicum were to be specified and could be as broad or specific as the worker and supervisor wished. For instance, the worker and supervisor might have agreed to concentrate on a broad area -- such as all aspects of the intake (case acceptance) function of child protection. Such a

practicum would take into account who the client is as well as the types and purposes of questions asked and appropriate interviewing styles. Or, the worker might have desired a more specific or focused practicum experience and chosen to concentrate on a specific listening technique. However, in all cases the practicum objectives were to be realistic, clearly stated and understood by both the worker and the supervisor. If learning areas were too specific or limited, the worker might not make the maximum use of the practicum as an opportunity to improve practice. If, on the other hand, areas were too broad, they might be too difficult for the worker to handle in the time allotted and might lead to worker failure and frustration and a poor practicum experience for both worker and supervisor. Finally, a rationale for the choice of learning areas was to be provided.

Supervisors and workers were also to list specific objectives of each practicum experience's learning areas. Objectives were to be measurable and specific. An example of such an objective would be:

> "At the conclusion of this practicum the worker will understand and be able to selectively and spontaneously demonstrate three listening techniques which encourage a client to continue talking."

Workers and supervisors were asked to list all applicable objectives. (More than one objective could exist for a learning area.)

A teaching plan was to be completely described in the evaluation for meeting the defined objectives. Participants were to:

- State and describe the methods for teaching;
- State activities and purposes of these activities;
- State what arrangement would exist for feedback;
- Indicate how the core curriculum would be used as a resource; and,
- Establish a time frame for the plan.

If a case was to be used in the learning process they were to provide a brief summary of the nature of the case. They were also instructed to include methods of supervision to be used and a rationale for these methods.

At the conclusion of each three-week practicum, participants were to describe in some detail how the practicum's implementation occurred. For example: Were there barriers? Were there adjustments? Was the plan carried out as originally designed? Essentially, they were to provide a narrative of how the teaching plan was actually applied.

Finally, after each practicum experience, workers and supervisors were to jointly state the specific outcomes for each learning objective and the extent to which they were accomplished. In addition, they were to indicate after the fact how appropriate they believed the original objectives and plan to have been.

(4) The practicum assessment instrument. Following the three practicum experiences, both the supervisors and workers were asked to complete a practicum assessment form (see Appendix E). Basically participants were asked to assess various aspects of the practicum

on a scale of one (total disagreement) to five (total agreement). Areas of assessment included: the extent to which creative methods for learning were utilized; the level of motivation and investment in the practicum; whether the practicum's purpose and design of the practicum were clear and jointly agreed to; the utility of the practicum for training and as a future tool for learning; whether the curriculum content was applied in the practicum; barriers which existed; the extent to which the climate was supportive or intimidating; and particular ways of improving the practicum.

In sum, regardless of the learning area(s) chosen, supervisors and workers were told to follow these rules:

- The practicum experience was to be growth related. Supervisors were to concentrate on areas of deficiency or areas in which the worker has less competence.
- The practicum design was to be agreed upon by both the worker and his or her supervisor.
- The practicum design was to include a specific plan with stated methods for implementing learning objectives.
- Each three-week practicum experience was to be based only on the content covered in the week of core curriculum training immediately preceding it.

The American Humane Association believes that by approaching the practicum as described, knowledge of CPS and better application of that knowledge would lead to more effectiveness with clients. In addition, it was anticipated that the experience could be continued and applied to new learning areas.

Unfortunately, because of the course of the project and the failure of a sufficient number of workers and supervisors to complete the practicum forms, an evaluation of the practicum is not reported fully in this report. Some individuals indicated that the amount of paperwork and consultation time involved in documenting the practicum was considered to be too burdensome to staff. Others indicated that they were unaware that they were expected to participate in a practicum; that their caseloads were too high to permit participation; or that supervisors had changed or had left their positions. Although all supervisors were trained with respect to the practicum during supervisory training and were asked to consult American Humane staff with questions which arose, completion rate on returned instruments was significantly low. As a consequence, evaluation of casework skills in practice in relation to training was not feasible, although a brief summary of the results of the few practicum packages returned is included.

(5) Supervisory Self-Assessment Instrument. Supervisory self-assessments (see Appendix G) were to be administered before supervisory training and at a point after the entire training effort had ended. Supervisors were asked to assess the amount of time they spent as administrators and educators and in case consultation, worker evaluation and personnel support. The reasons for their activities and their supervisorial methods were also solicited. Finally, perceptions of areas of responsibility, barriers to effectiveness, self-rating of effectiveness and assessments of

supervisorial role satisfaction were to be obtained. The overall purpose of the self-assessment was to obtain some measure of self-perceived change during and possibly as the result of the training effort.

Again, very few supervisory self-assessments were returned to AHA so that even limited analysis could not be included in this report. Once again, it appears that a better method of motivating supervisors or more closely addressing supervisory demand on time would have been helpful in soliciting a better response. Possible administration of the post supervisory instruments to those supervisors who attended the training, at the time of the core curriculum post-test, might have been a preferable way to proceed.

(6) Evaluation of trainers by employees. One evaluation form was completed by all employees for each segment of the curriculum. The initial evaluation (Appendix H) used by supervisors and administrators consisted of a rating scale from one to six, representing strong disagreement to strong agreement on each of eleven statements related to the quality and effectiveness of the faculty member's presentation. Each of the statements was rated separately. They were worded as follows:

1. The content was covered thoroughly.
2. The content was interesting and challenging.
3. The content was relevant and practical.
4. The objectives were clearly stated and consistent with content.

5. The objectives were fully met.
6. The teaching methods enhanced learning.
7. The facilities enhanced learning.
8. The trainer was enthusiastic.
9. The trainer was organized and well prepared.
10. The trainer was knowledgeable.
11. The trainer was sensitive to the needs of the group.

Thus, for the supervisory and administrator waves, evaluation sheets were completed by every participant on every faculty presentation, rating each of the eleven statements from one to six. To rate trainers, a composite score for each statement was computed for each trainer. Then the overall scores for all questions on each evaluation sheet for all participants in the workshop were averaged to obtain a composite score for the trainers. Subsequently another composite score across all trainers was obtained on each of the eleven statements. Scores were then transformed for analysis purposes to match items on a revised nine-point scale which would be used throughout upcoming worker training.

The revised instrument (Appendix H) used by trainees in all five worker waves consisted of ten items (qualities or characteristics) which were rated on a nine-point scale. An advantage of the revision was that the rating of facilities and presentation were separated and more response variability was allowed. The items were worded as follows:

1. Coverage of material.
2. Interest and challenge of content.
3. Relevance and practicality of content.
4. Objectives stated and consistent with content.
5. Achievement of objectives.
6. Organization and preparation of trainer.
7. Trainer's knowledge.
8. Trainer's enthusiasm.
9. Trainer's sensitivity to needs of group.
10. Degree to which teaching methods enhanced learning.

Each of the ten statements on the revised form was rated from one to nine, according to three rating groups: ("poor", "average", and "good"), of three levels each ("low", "mid", or "high"). In addition to the ten statements, participants were also asked to rate both the "overall session" and "facilities" according to whether they were felt to be "excellent", "good", "adequate", or "poor". Analysis of each session was essentailly the same as that described for the faculty evaluations collected from the Spring, 1981 sessions.

(7) Surveys. There were two separate surveys (see Appendix F) utilized over the course of training in Alberta. In the Spring of 1981 there was administered a pre and post "perception survey for child protection" which was designed to elicit opinion about the extent to which the employees agreed or disagreed with 17 statements concerning CPS. There were two forms (A and B) of the survey with

the same question worded differently in both, and later matched for analysis. Examples of statements responded to on this survey included: "I feel that a CPS worker should be available to clients even after work hours"; and "I believe that workers have an obligation to work closely with their supervisors when making decisions".

Trainees in the worker waves beginning in the Fall of 1981 received a "Professional Standards Survey" (Appendix F) as part of the post-test package which was designed to assess the level of agreement or disagreement on a five-point scale to each of 15 questions based on American Humane's professional standards for the field of child protection. Examples of statements on this survey would include: "Supervisors and workers with whom I come in contact identify with the helping, non-judgmental, non-punitive philosophy of child protective services"; and, "In my agency, child protection staff are available to clients 24 hours a day, every day".

VI. EVALUATION OF COMPREHENSIVE CHILD PROTECTIVE SERVICES TRAINING: SUPERVISORS AND ADMINISTRATORS.

Introduction. The first training conducted by The American Humane Association was initiated in April, 1981 and was completed in June, 1981. Training was delivered to two separate groups or "waves" made up exclusively of child welfare supervisors and administrators.

Overall there were 61 supervisors and 24 administrators trained in these initial two training waves, involving a total of 23 days in which there were 138 contact hours between trainees and American Humane faculty.

The curriculum was presented according to the basic three-week format but without the separate half day eventually included in the worker training for a structured overview of the training components and slide discussion of burn-out issues affecting child welfare workers.

Supervisors and administrators took the pre and post-test exams, and filled out a background questionnaire concerning child protective services. At the end of each content session an evaluation of the presentation was completed by all employees. Suggestions for improvement were incorporated into future training sessions where appropriate and feasible.

Description of instruments involved. The following section specifically describes the instruments administered in the first two waves of training. There was no administration of practicum material since it was designed for use of the line worker (supervised by this group of supervisors).

1. Pre-Training Background Questionnaire. This questionnaire (see Appendix C) was completed by all supervisors and administrators, and, later, all workers, at the outset of training. It was designed as a simple two-page instrument whose purpose was to gather data on each participant's age, sex, education, position classification, prior CPS training, work experience, current caseload size, number of CPS families served, and other current responsibilities.

2. Pre and Post-Training Perception Survey for Supervisors and Administrators. Both supervisors and administrators were asked to what extent they agreed with a number of statements related to child protective services both before and after training. The objective of asking trainees to complete the perception survey form was to ascertain to what extent trainee perceptions were in agreement with the principles judged by American Humane to constitute good CPS practice. The survey existed in two forms, each with matched, comparable questions (Appendix F). Employees who were administered Form A in the pre-training package received Form B in the post-training package, and vice versa.

3. Pre and Post Core Knowledge Exams. For the supervisory and administrator training groups, two forms, A and B, of a 44 - item multiple choice test were administered. The half of the pre-training group who received Form A received Form B on the post-test, and vice versa.

The purpose of the following sections of the report is to describe the results of analyzing the data obtained from the instruments discussed in Section V. For the Spring 1981 waves of training, the instruments analyzed included:

- Background questionnaires
- Pre and post-test core exams
- Pre and post perception surveys
- Employee evaluations of sessions

Analysis of the background questionnaires: Description of the Spring 1981 employee group. Sixty-one supervisors and 24 administrators completed a background questionnaire. Of this group approximately 76.5% (65) were male and 23.5% (20) were female. All trainees were over 25 years of age with the median age equal to 31.4 year old. Twenty-six percent of the participants indicated they had held their current position less than six months, 9% between three to five years, 12% between five to ten years, and 10% had held their current positions for over 10 years. Nearly 70%, then, had at the minimum between one and three years in their current position.

In terms of experience in child protective services this group of DSSCH staff was notably experienced: only 3.8% had less than one year of CPS experience, 16.5% had between one and three years of CPS experience, 24.1% had between three and five years experience, 31.7% had between five and ten years experience, and 24.1% had over ten years CPS experience. Five employees indicated this item did not apply to them. Overall, 60% of this group of par. .ipants had over

five to ten years of CPS experience. The vast majority of employees indicated they had at least five to ten years of general social work experience, as well, corresponding with the extensive experience noted in CPS (and presumably redundant). Forty-three percent of the DSSCH employees had over ten years of general social work experience.

Of employees who responded as having CPS supervisory experience, 10.1% had fewer than six months suprvisory experience, 13.0% had between six months to one year of experience, 30.4% had between one and three years experience, 14.5% had three to five years experience, 20.3% had between five and ten years experience, and 11.6% had over ten years supervisory experience. At least 46% of this group had more than five years CPS supervisory experience; again a highly experienced group of participants.

Fifty-five percent of the participants indicated they had other supervisory experience as well as CPS supervisory experience, with 46.8% indicating more than three years such experience.

The more frequently indicated educational degrees were an associate degree or some college (25.3%), a BSW (15.4%), or a social science university degree (20.9%). Twelve percent held another university major degree, 11.0% had M.S.W.'s, 6.6% had other Masters degrees, and another 5.5% had partially completed graduate degrees. Two individuals had high school diplomas and one person held an advanced degree other than a Masters (but not a D.S.W.). Although it is hard to differentiate clearly based on this survey, it is

apparent that about 47% of the participants' educational background was consistent with social work experience (BSW, social science major, and MSW) or somehow relevant to child protection.

Formal CPS training was another matter, however. Ninety-three percent of the participants had received no prior specialized CPS training or supervisory training at all. Of the individuals who had received specialized CPS training, however, none indicated they had had more than 40 hours of such training.

In terms of supervision there was a total of 72 individuals who responded with information on the number of workers they supervised. Nearly 77% of the respondents supervised between five and ten workers, over 19% supervised fewer than five workers, while fewer than 3% supervised more than 10 workers.

The question of how many CPS workers were supervised was also asked of participants. Nearly 78% of the group indicated they supervised CPS workers and of this number, 56.1% supervised fewer than five CPS workers, 40.9% supervised between five to ten CPS workers, and 3.0% supervised more than ten CPS workers.

To summarize the background of the first two groups of employees, they were either supervisors or administrators, primarily males over 25 years old, had extensive CPS and social work experience, and had held their current position for more than a year. Nearly half of the individuals represented in these training groups had over five years CPS supervisory experience as well. Approximately one-half of these participants had at least three

years of other supervisory experience. Formal educational background was primarily in areas relevant to social work, but only a few individuals in this group had any prior specialized CPS or supervisory training, and this was limited to a few hours only.

Analysis of pre and post comprehensive CPS knowledge exams. One of the major purposes of the evaluation of the training was to ascertain whether or not employee knowledge regarding CPS increased between the onset of training and its completion. A second major issue addressed by the evaluation was the identification of content areas within the core curriculum for which employees showed the greatest and least gain in knowledge as measured by core curriculum pretest and post-test scores. For purposes of analysis, the content areas of the core curriculum were grouped as follows:

- Intake, Interviewing, and Initial Contact
- Dynamics of Abuse and Neglect, Child Development and Parenting
- Assessment, Case Planning and Case Review
- Treatment
- Legal and Medical Aspects of Child Abuse Neglect

The pre and post-tests included questions in each of these content areas of the core curriculum which were identified and scored as a group. Employees in the Spring, 1981 were given one form of the test, containing 44 questions, before training and a second version also containing 44 items, after training. An attempt was made to assign participants to test form A or B for the pretest

in a random manner so that half of the group took form A as the pre-test and half took form B. Then, after training, participants were given the other version of the test.

There was a total of 77 employees who completed the two forms of the pre-test. Scores were compared by means of t-test analyses of overall pre and post-test differences, of differences between the two forms of pre-test, and of differences between the two forms of the post-test. In addition, because some individuals had to have both the pre-test and the post-test administered at a time other than (after) the central administration of the tests, these differences ("scheduled" vs. "late") were also analyzed.

Pre and Post-test Differences. Overall there was a significant difference between the pre-test and post-test scores when all individuals were considered ($t=4.08, p<.001$) which indicates that the effects of training and accompanying study significantly increased knowledge as measured by the objective testing procedure. The t-test control comparison between Forms A and B of the pre-test and Forms A and B of the post-test revealed there were no significant pre-test or post-test differences between these forms of the test, thus adding weight to the significance of the positive gain in scores following training (i.e. there was no test/re-test effect).

The t-test analysis of "scheduled" vs. "late" test administration indicated there was a significant difference between Form B ($p<.05$) but not Form A on the pre-test. There was no effect of late administration of the post-test for either Forms A or B,

however. Whatever effects were present for some individuals on the pre-test to help them score higher on Form B apparently "washed out" over the course of the training program and can be considered relatively unimportant.

Content analysis for knowledge exam. Scores for every individual were grouped into content areas and difference scores computer between the pre and the post-test. There were small but positive changes between pre and post-test scores in each content area. In terms of mean percentages pre and post content scores respectively, dynamics and development scores were 59.7% vs. 62.6%; legal and medical were 72.6% vs. 76.3%; intake, interviewing, and initial contact were 59.7% vs. 62.6%; assessment, case planning and case review were 61.1% vs. 66.3%; and treatment scores were 52.9% vs. 58.6%. The highest knowledge scores were reflected in the legal and medical content areas and the lowest scores were in the treatment area. Interestingly, however, the greatest knowledge gain was in the practice areas of assessment and treatment, ar[illegible] also emphasized in training.

Discussion of Comprehensive Exam Results. Overall there were significant pre and post-test differences which can be attributed to having been involved in comprehensive training. For this group of administrators and supervisors, knowledge of legal and medical issues of child abuse and neglect were particularly high, perhaps due to the extensive CPS experience of the group. The assessment and treatment scores on the other hand, were lower initially but

showed a greater positive change, presumably a result of training. In general, these areas are known to be difficult for employees because so little prior formal training relates to child protection and in Alberta, especially, very few participants had had any specialized CPS training at all. The overall small differences between the pre and post-tests, although positive and significant, may conceivably indicate that trainees as a group did not invest heavily in studying beyond the training sessions prior to the post-test. The majority of the material of the test is based on the content available in the accompanying training text, Helping in Child Protective Services, which was given to every trainee. Since there was no visible incentive other than personal, for studying for the post-test (partially because test results were held strictly confidential), the small pre and post-test differences may be attributable to low motivation to achieve on the post-test. An individual's personal strategy could well have been to put that same energy into administrative and supervisory tasks. In retrospect, then, it may have been a better method to provide positive external incentive to read and assimulate training material, especially if post-test scores are taken as the only measure of knowledge gained. One possible mechanism for achieving a higher level of motivation for studying might have been to withhold American Humane Certification of Completion of Training until a minimum post-test score was achieved. This may be an area DSSCH would wish to incorporate into their own training and evaluation effort, still

enabling the Department to maintain a level of confidentiality about test scores.

Analysis of the Pre and Post Perception Survey. In general, trainees responded in accordance to "preferred" perceptions in the field of child protection as judged by American Humane for each of the analyzed statements of the survey. In addition to responding in the preferred direction there were three particular statements which indicated a positive shift on pre and post perception of more than 10%: (1) a belief that it is important to plan for dealing with hostility from clients at the initial contact (>+10%); (2) a belief that the CPS worker is responsible for educating those persons who make reports of child abuse and neglect in terms of the agency's role (>+30%); and (3) a belief that the CPS worker should share what is known about the client with the client (>+10%). Two questions concerning the central focus of CPS and the importance of cultural differences were not analyzed because they were judged to be worded ambiguously.

It is important to ascertain that child welfare professionals in Alberta hold consistently appropriate attitudes concerning the role of child protective services. Because even initial attitudes were judged to be appropriate and distinct changes for even a "more appropriate" response was demonstrated for only three statements, however, it was decided further testing with this particular instrument would be of little additional benefit in terms of contributing to the evaluation. Consequently a new survey was

designed, based directly on professional standards promoted by AHA, to be included in the post-test package for all workers beginning in the Fall of 1981. This professional standards survey was used throughout all worker waves (Wave I - Wave V).

Analysis of employee evaluation of trainers and training sessions: Overall ratings by supervisors and administrators.

Overall ratings. Each content session was separately evaluated by each employee over the course of the entire training project. Data presented represent the overall results in terms of the individual statements for both training groups over three weeks of training. The results are presented in terms of the mean rating, which was transformed from a six to a nine point scale to correspond to the revised instrument which was used for all worker waves. The average score for the sessions overall was 8.2 on the transformed nine point scale. The following indicates the mean ratings for individual items:

TABLE I

AVERAGE EMPLOYEE RATINGS OF ALL SESSIONS

Evaluation Statement	Mean Transformed Rating*
1. The content was covered thoroughly.	8.1
2. The content was interesting and challenging.	8.3
3. The content was relevant and practical.	8.4
4. The objectives were clearly stated and consistent with content.	8.2
5. The objectives were fully met.	7.8
6. The teaching methods enhanced learning.	7.7
7. The trainer was enthusiastic.	8.6
8. The trainer was organized and well prepared.	8.4
9. The trainer was knowledgeable.	8.8
10. The trainer was sensitive to the needs of the group.	8.4

*A score of 9 = highest and 1 = lowest possible rating.

The statement, "The facilities enhanced learning" was analyzed separately since little control could be exerted over this variable by American Humane faculty. The mean rating for facilities was 6.2 on the nine-point scale. Sessions for the two Spring 1981 waves of training were held at a community college in rooms designed more for academic lectures than for adult group learning needs. Feedback from some of the trainees indicated that rooms during weeks two and three may have been too small for the approximately 25 participants assigned to each.

Combined rating by content area. Employee evaluations were analyzed for each individual content session as well. Table 2 presents the mean rating for each of the ten evaluated statements described in Table 1. The average overall rating for the trainers and their sessions and the average rating of adequacy of the facilities are presented in Table 3. In Tables 1, 2, and 3, evaluations from both waves of training are combined.

TABLE II

AVERAGE EMPLOYEE RATINGS OF SESSIONS BY CONTENT AREA FOR INDIVIDUAL STATEMENTS, SPRING 1981.

	STATEMENTS*									
	1	2	3	4	5	6	7	8	9	10
Dynamics	7.9	8.1	8.3	8.0	7.6	7.1	8.5	8.4	8.8	8.2
Medical	8.5	8.6	8.4	8.4	8.3	8.1	8.6	8.9	9.0	8.3
Child Dev/Par	7.8	7.7	8.2	8.4	7.8	7.4	8.5	8.1	8.5	8.6
Intake	7.4	8.0	8.1	7.7	7.2	7.0	8.4	7.9	8.7	8.0
Legal	8.4	8.8	8.5	8.2	8.0	8.2	9.0	8.5	8.9	8.7
Casework	8.5	8.3	8.7	8.4	8.0	8.2	8.8	8.8	8.9	8.7

*Refer to Table I for wording of statements

TABLE III

AVERAGE EMPLOYEE RATINGS OF OVERALL SESSIONS AND FACILITIES FOR EACH CONTENT AREA, SPRING, 1981

	OVERALL SESSION	FACILITIES
	MEAN RESPONSE	MEAN RESPONSE
Dynamics	8.0	6.6
Medical	8.4	6.8
Child Dev/Par	8.1	6.2
Intake	7.7	5.5
Legal	8.5	6.3
Casework	8.5	5.7

Summary of employee evaluations. Data from the employee evaluations of both sessions in the Spring of 1981 indicate that all sessions were extremely well received with a very high degree of consistency. Areas which were rated especially high were those which related to the personal characteristics of the faculty (enthusiasm, organization and preparation, knowledge, and sensitivity). Other areas which were rated high concerned the coverage of material, the interest and relevancy of the session, and statements of objectives. Ratings were somewhat less high for statements regarding how fully objectives had been met and the degree to which methods had enhanced learning, although even these ratings were in the upper 20% of the rating scale.

For the individual content areas there was remarkable consistency of high ratings indicated (Table 2). Teaching methods

were a minor concern in the dynamics and intake sessions, and to a lesser extent in child development and parenting. Thorough content coverage was especially indicated for the medical, legal and casework workshops; and particularly interesting workshops were reported for the medical and legal areas (where the highest core exam knowledge was demonstrated). Relevancy of material was particularly noted for the casework sequence which is designed to be the most practical of the curriculum, having built on all previous material.

VII. EVALUATION OF COMPREHENSIVE CHILD PROTECTIVE SERVICES TRAINING: WORKERS AND SUPERVISORS, NOVEMBER 1981 TO DECEMBER 1982.

Introduction. The first comprehensive training of workers conducted by the American Humane Association was initiated in November 1981 (Wave I). The comprehensive evaluation of this training continued through December, 1982 (Wave V). Over the course of the five training groups or waves of training, data from approximately 357 workers and 30 supervisors who were unable to receive previous AHA training were evaluated. Approximately 75 employees participated in each training group (wave).

The basic CPS comprehensive curriculum was presented according to the same three-week format experienced by supervisors and administrators in the Spring, 1981. For each of these waves, training was preceded by administration of the core knowledge exam and background questionnaire, the training overview, and a presentation on worker burnout. As established in earlier training, each content session was evaluated by employees over the entire three weeks of training.

Following training the post-test was administered along with the professional standards survey.

In addition to the pre and post-testing, workers involved in Waves I-V of training were: (1) to be evaluated by their supervisors in the form of pre and post worker performance assessments, (2) to engage with their supervisors on practicum problems which related to training, and (3) to complete a practicum

evaluation designed to provide feedback on strengths and weaknesses in the practicum as designed by American Humane.

Description of instruments involved. The following section specifically describes the instruments administered in the five waves of worker training, November 1981 - December 1982.

1. Pre-training Background Questionnaire. This questionnaire was the same as completed by supervisors and administrators in the Spring of 1981. Data provided by the questionnaire included participants' age, sex, education, position classification, prior CPS experience, work experience, current caseload size, number of CPS families served and other current responsibilities.
2. Pre and Post-Training Knowledge Exams. For the five worker waves beginning in November 1981, a revised 75-item multiple choice exam was used. Items in this test were randomly ordered for the pre-test with the sequencing of items altered for the post-test. A control group was used to assess any test/retest effects (none were found).
3. Professional Standards Survey. All participants in Waves I-V received a 15-item professional standards survey to complete as part of the post-test package. The survey is based on American Humane's standards for quality practice and was designed to identify possible or perceived barriers to achieving higher practice skill levels in Alberta.

4. Pre and Post Training Worker Performance Assessments. Supervisors were instructed to complete with each worker a pre-training worker assessment and a post-training worker assessment which identified levels of knowledge and application of that knowledge for 11 content areas covered in training.

5. Practicum. Following each week of the three-week curriculum supervisors were instructed to engage workers on a practical field problem which related to the previous week's training content. The subject of the practicum and methods for studying the practicum issue were purposely left flexible to make the practicum experience as much a part of the worker's ongoing casework as possible.

6. Employee Evaluations of Sessions. A revised 10-item questionnaire which incorporated a nine-point scale for each item was used for all five worker training waves. Revision of this evaluation tool included separating perceptions regarding the facilities from those concerning the instructor, and more clearly structuring the format for comments.

The purpose of the following sections of the report is to describe the results of analyzing the data obtained from the instruments discussed here and in Section V. For the five worker waves beginning in November, 1981, the following instruments were used:

- Background questionnaires
- Pre and post-test knowledge exams
- Professional standards survey
- Pre and Post-testing worker performance assessments
- Practicum
- Employee evaluations of sessions

Descriptive Analysis of the Background Questionnaires, Waves I-V.

There were 357 workers and 30 supervisors who completed the background questionnaire. For all five waves of training combined, 32.3% of the participants were male and 67.7% were female. This compares dramatically with the previously noted distribution across sex represented by administrators and supervisors trained in the Spring, 1981 (76.5% were male; 23.5% were female). The mean age of participants was 31.8 years, with the range of ages being from 23 to 61 years. The age of employees in the "worker" wave, essentially compares to the median age of 31.4 years noted previously for administrators and supervisors in the previous training. Where there was a response, participants indicated they had held their current job for an average of 1.4 years, had an average of 2.5 years prior experience in CPS, and had an average of 4.8 years experience in general social work.

There were 30 supervisors who attended "worker" training over the course of the five training waves. For those that responded, their average time as a CPS supervisor was slightly under one year (0.98 years), perhaps indicating they may have not yet been a

supervisor at the time of Spring, 1981 training. Overall, employees in Waves I-V, when compared to administrators and supervisors previously described, were less experienced in both CPS and general social work practice. The supervisors who went through worker training had held their jobs much less long than supervisors in the initial training, which can be considered an expected result.

The vast majority of employees indicated the size of caseload they were currently carrying. Caseload was defined in terms of the total number of families served, and of those, how many were child protective service (CPS) families. Overall, employees carried on an average of 42.98 families of which an average of 27.26 were CPS families.

For the supervisors who responded, data showed that there was an average of 7.9 workers supervised, with 6.2 of these workers identified as CPS workers.

The question was asked whether the employee had received any prior CPS training and, if he or she had, how many hours were completed and the date of the most recent training. From this data, only 16.5% of the respondents indicated they had received any prior specialized CPS training for an average of 21.8 hours.

The majority of employees (83.5%) indicated no prior specialized CPS training at all. Almost 83% of participants who had received prior CPS training, received it after October, 1981. Some of this training conceivably could have been associated with American Humane workshops, particularly the supervisory workshops which began in September, 1981.

Analysis of the background data for the income security control group indicated the group was matched approximately for mean age (31.8 years), although there was a slightly higher representation of females (80%) versus males (20%). The average number of years in the current position for the control groups was 2.1 years as compared to 1.4 years for workers. One-third of the participants in the control group indicated they had CPS experience having spent an average of 1.4 years in that position. Overall, individuals selected for the control group had spent an average of 2.8 years in social work. There were no supervisors in the control group.

In summary, besides the obvious job function differences between income security and child protection, individuals in the control groups had been in their current position slightly longer and they had spent less total time in social work. Of those who had a CPS background, they had spent approximately a year less in a CPS position than those who attended training.

Analysis of the Background Questionnaires by Wave. Table 4 demonstrates the worker profiles for employees in each training group (wave) for the following variables: (1) age in years, (2) sex, (3) years in current position, (4) years in CPS position, (5) years in general social work and, (6) years as a CPS supervisor for each of the five worker waves:

TABLE IV

AGE, SEX, AND EXPERIENCE OF EMPLOYEES
IN WORKER TRAINING WAVES I-V

Mean Value		Worker Training Groups (Waves) I	II	III	IV	V
(1)	Age (Years)	31.5	28.9	31.3	29.7	30.6
(2)	Sex					
	%M	33.8	36.5	27.4	35.7	28.4
	%F	66.2	63.5	72.6	64.3	71.6
(3)	Years in Current Position	1.5	1.4	1.5	1.2	1.5
(4)	Years in CPS	3.1	2.6	2.2	2.2	2.0
(5)	Years in S.W.	5.1	5.0	4.4	4.4	4.8
(6)	Years as CPS Supervisor	1.5	2.3	0.4	0.3	0.4

Age(1) of employees in each of the five training waves was similar, ranging from a low of 28.9 years to a high of 31.5 years. This would seem to indicate that in Alberta workers in child protection are experienced workers, which is evidenced again when the number of years in CPS(4) and general social work(5) practice is scrutinized. The average number of years workers have been in social work(5) gives an indication that workers have, on the average, between 4.4 and 5.1 years experience. The average number of years in actual CPS practice(4) is lower, ranging from 2.0 to 3.1 years experience, but the figures still indicate considerable

exposure to the field of child protection. Over the five waves, there appears to be a slight tendency towards less CPS and social work experience as time goes on. This trend, if real, may indicate a selection bias towards more experienced workers in the earlier training groups, which in fact may have been intentional. The average number of years in the trainees' current position(3) varied between 1.2 and 1.5 years, figures which are consistent with the changes which have occurred in DSSCH over the course of this project and with the relatively high turnover associated with CPS positions in general.

Years as a CPS supervisor(6) ranged from 0.3 to 1.5 years with a tendency toward less supervisory experience as training continued over the five training waves. As previously discussed, it is likely that supervisors who attended "worker" training were new to the position of the Department. Presumably they would have attended one of the two training groups for administrators or supervisors in the Spring, 1981, if they had been established in a DSSCH supervisory function at that time.

Table 5 summarizes the following variables for each of the five training waves: (1) average total families in caseload, (2) average total CPS families in caseload, (3) number of workers supervised, (4) number of CPS workers supervised, (5) percent of employees who have received prior CPS training, (6) the average number of hours of prior CPS training, (7) the percent of employees with prior CPS training who have received such training since October 1981, and

finally, (8) the number of employees who attended each wave of training.

TABLE V

CASELOAD SIZE, SUPERVISOR/WORKER RATIOS, AND PRIOR CPS TRAINING EXPERIENCE FOR EMPLOYEES IN WAVES I-V.

	Worker Training Groups (Waves)				
	I	II	III	IV	V
Mean Value					
Caseload:					
(1) Total Families	42.1	35.8	42.8	48.8	45.4
(2) CPS Families	27.4	21.9	28.7	24.7	23.6
Number of workers Supervised:					
(3) "General"	7.7	10.1	6.0	6.5	8.5
(4) CPS	5.6	8.0	5.2	5.3	6.7
Prior CPS training:					
(5) % who received	13.8	11.5	18.6	27.7	11.1
(6) Number of hours	29.0	12.0	21.2	20.9	26.0
(7) Percent trained since October 1981	37.0	100.0	71.0	86.0	100.0
Number(n) of total employees in evaluation	74	75	73	71	74

When average size of caseloads are analyzed, workers in Alberta who responded indicated they carry on the average between 35.8 and 48.8 total families and between 21.9 and 27.4 CPS families. American Humane's standards of practice recommend workers carry a maximum of 20-25 CPS families in their caseload and we endorse a specialized CPS rather than generic caseload. The reason for this is that American Humane believes CPS casework is unique, extremely

demanding and requiring extensive specialized training beyond what is required in more generalized social work practice. Quality of practice in helping families involved with child abuse and neglect potentially is enhanced if workers become more specialized in their skills and casework, much as is found in other helping professions where individuals specialize.

Although the number of supervisors in the "worker" waves was small (30), an estimate of the average number of workers supervised can be found in Table 5 in categories (3) and (4). The average number of "general" workers supervised ranged from 6.0 to 10.1; however, because of the wording of the questionnaire it is not possible to ascertain if the "number or workers supervised" includes clerical staff or non-CPS workers, or both. In terms of number of CPS workers supervised, American Humane recommends that the maximum supervision to CPS worker ratio be no more than 1:7. In Waves I-V, at least, Alberta supervisors reported they supervise between 5.2 to 8.0 CPS workers, which is within the recommended practice standards. This supervisor to worker ratio is critical to quality practice in child protective services since the supervisor must play an integral part in decision making in high risk cases and in personally promoting professional growth in CPS workers. Since the data on the number of supervisors here is limited and is potentially related to the experience level of supervisors represented in Waves I-V, the Department may wish to carefully monitor the supervisor/CPS worker ratios over time and with more experienced supervisors. If this

data is found to be representative, the Department is to be commended on recognizing the important, essential role of supervision in CPS practice and encouraged to maintain the current ratio of supervisors to CPS workers.

Items (5) to (7) in Table 5 refers to the amount of prior specialized CPS training participants recorded, presumably prior to American Humane's comprehensive CPS training. The mean percentage of employees who had any prior CPS training ranged from 11.1 to 27.7 percent. For those who did have prior CPS training, however, the average total number of hours of such training ranged from only 12 to 29 hours. Furthermore, the vast majority of employees who had received specialized CPS training had received it within the past two years. These figures indicate that workers in Alberta generally have not had the opportunity to receive specialized CPS training prior to becoming involved in American Humane's comprehensive training program. This essential component of established minimally acceptable standard of practice through specialized professional training in CPS needs to be firmly established as an ongoing Departmental commitment to the community, its families and children, and the workers and supervisors who serve these families. The Department deserves acknowledgement for providing this mechanism for ongoing comprehensive CPS training through its own training staff as a means of achieving and maintaining quality CPS practice in the Province of Alberta.

Educational background of employees in Waves I-V is presented in Table 6 as the percentage of employees who hold each of the indicated degrees or have the indicated educational background:

TABLE VI

Education Background of Employees in Worker Training, November 1981 to December 1982.

	Percent
High School	2.5
Community College	12.3
Partially Completed Community College	4.7
BSW	44.8
Social Science University Major	14.4
Other University Major Degree	5.4
Partially Complete Graduate Training	2.2
MSW	8.7
Other University Masters Degree	2.9
Other Training	2.1

In comparison to education levels of supervisors and administrators who attended Spring 1981 training, more workers and supervisors here had BSW's (44.8% vs. 15.4%), fewer had social science degrees (14.4% vs. 20.9%), and fewer had M.S.W.'s (8.7% vs. 11%) or other masters (2.9% vs. 6.6%). Overall more had degrees relevant to child protection (67.9% vs. 47.3%) as defined by the combination of B.S.W., social science major, and M.S.W. degrees.

Overall results of knowledge exam. The multiple choice core context exam was administered on a pre and post-test basis as previously

described for all participants involved in "worker" training in Waves I-V. For this analysis data from 357 workers and 30 supervisors were able to be analyzed separately and together over all five waves or groups of training. Results from each individual training wave are discussed in the sections which follow.

Taken as a group, in which scores for supervisors and workers are combined, there was a significant pre/post difference when scores were tested (t=16.16, $p<.005$ and F=90.32, $p<.01$, both one-tailed tests). For all five waves overall the pre-test mean was 47.42 and the overall post-test mean was 51.96, or a mean difference of 4.54 points. This mean difference accounted for slightly more than a six percent gain on the average, between the pre and post-test when supervisors and workers were combined.

The standard deviations for the pre and post-test were approximately equal, at 5.88 and 5.98, respectively. Scores on the pre-test ranged from a low of 29 to a maximum of 59; the post-test scores ranged from a minimum of 31 to a maximum of 62.

Pre and post-test scores were next analyzed individually for each of the five training groups (waves) who received training. Table 7 represents the levels of t and F-test significance for each of the five worker waves evaluated.

TABLE VII

PROBABILITY VALUES OF OVERALL SIGNIFICANT PRE-POST DIFFERENCES ON KNOWLEDGE EXAM FOR EACH TRAINING GROUP (WAVE).

WAVE	t-test*	F-test*
I	.005	.01
II	.001	.01
III	.001	.01
IV	.001	.01
V	.005	.01

*Values are for one-tailed tests.

As can be seen in Table 7, there was a significant knowledge gain between the pre and post-test for all training groups, differences which are most likely due to the effects of comprehensive training for the involved participants.

When the data were analyzed according to job function, results indicated that supervisors also demonstrated a significant and positive post-test gain ($t=5.27$, $p<.005$ and $F=13.84$, $p<.01$ for one-tailed tests). The mean pre and post-test scores for supervisors exclusively were 48.73 and 54.80, respectively. It is important to note that these scores are higher than the worker scores described below.

The standard deviations for the pre and post-tests were 6.31 and 4.44, different from the standard deviations indicated in the overall analysis for workers and supervisors combined. This difference is largely due to the small and unequal sample size for supervisors between the pre ($n=30$) and post-test ($n=20$) as compared

to the overall sample size which includes workers. Scores ranged from 29 to 52 for the pre-test and 38 to 62 for the post-test.

Overall worker results of knowledge exam. For workers, 336 pre-tests and 245 post-tests could be analyzed. When workers scores were analyzed separately there was a significant pre/post-test effect as measured by both t and F-test analyses ($t=16.16$, $p<.001$; $F=79.18$, $p<.01$ both one-tailed tests). The overall worker pre and post-test means were 46.50 and 51.73; and pre and post-test standard deviations were 5.84 and 6.04. Scores ranged from 29 to 59 on the pretest and 31 to 62 on the post-test. Scores for workers, although indicating a positive, significant pre/post-test gain, were somewhat lower on both the pre and post-test when compared to supervisory scores. In addition, the observed mean increase for supervisors was 8.1% compared to 5.9% for workers, thus indicating that not only did supervisors exhibit more knowledge both prior to training and following training, but that they also tended to gain more as a result of training.

Overall results from control groups on knowledge exam. The results described for workers and supervisors can be compared to scores obtained from the control groups which did not attend training. For the control groups in which data was available for 30 individuals who completed the pre-test and 12 who completed the post-test, there was no significant pre or post-test difference according to standard tests ($t=-0.11$, $F=0.35$). Mean pre and post-test scores were 43.9 and 42.6, respectively, and mean pre and post-test standard

deviations were 6.52 and 6.54. Control groups scores ranged from 27 to 54 on the pre-test to 29 to 50 on the post-test. The lack of significant pre and post-test differences for the control groups adds credence to the efficacy of training per se. The fact that the absolute pre-test mean for the control group was 3.5 points or nearly 5% below the pre-test mean for the training groups possibly can be attributed to the lack of specific prior CPS experience previously noted in the control group. The data strongly suggests that training indeed had a significant effect on knowledge scores for participants who received training.

Analyses in the following sections describe effects of training on the five content areas covered in the knowledge exam: (1) dynamics and child development/parenting; (2) intake, initial contact and initial assessment; (3) assessment, planning and evaluation; (4) treatment; and (5) medical and legal issues.

Overall content results on knowledge exam for workers and supervisors. One-tailed t and F-test analyses were performed on pre and post-test scores for each of the five content areas. Table 8 represents the probability values for each content area according to which training group (wave) was tested. The upper figure in each cell refers to the t-test results; the lower figure in each cell describes the results from the F-test analysis. An asterik (*) indicates that the gain score for a particular content area was not significant for that training group at or below a probability value of .05.

TABLE VIII

PROBABILITY VALUES OF SIGNIFICANT PRE-POST DIFFERENCES
FOR EACH CONTENT AREA BY EACH TRAINING GROUP
(WORKER AND SUPERVISORS COMBINED)

Content Area	Training Group (Wave)				
	I	II	III	IV	V
Intake	.005 .01	.005 .05	.025 *	.005 .01	* *
Dev/Dyn.	.005 .05	.005 .01	* *	.005 .01	.005 .01
Ass., Plan, Eval.	.005 .01	.005 .05	.025 *	.05 *	.005 .01
Treatment	.005 .05	.005 .01	.005 .05	.005 .01	.005 .01
Legal/Medical	.005 .01	.025 *	.005 .01	.005 .05	.005 .01

As can be seen in Table 8, testing between pre and post-test means found that for the majority of content scores analyzed there existed a significant difference for the material covered on the exams.

The only instances of failure to achieve statistical significance in content areas within a Wave occurred in "Intake, Initial Assessment, and Initial Contact" in Wave III (F-test only) and V; in "Dynamics, and Child Development and Parenting" in Wave III; in "Assessment, Planning and Evaluation" in Waves III and IV

(F-tests only); and in "Legal and Medical" in Wave II (F-test only). Overall, however, when Waves I-V were combined for analysis, significant post-test gains were recorded for each content area. Table 9 demonstrates the probability values for one-tailed t and F-tests for each content area across all training groups (Wave I-V):

TABLE IX

SIGNIFICANCE LEVELS FOR EACH CONTENT AREA ACROSS ALL TRAINING GROUPS (WAVES).

	t-value	P	F-value	P
Intake	7.25	<.005	32.17	<.01
Dev/Dyn.	8.74	<.005	57.17	<.01
Ass., Plan., Eval.	6.32	<.005	23.33	<.01
Treatment	10.33	<.005	52.97	<.01
Legal/Medical	7.38	<.005	26.46	<.01

The degrees of freedom for the t-test content analyses (1,264) and the F-test analyses (1,630) were equal for all tests performed over Waves I-V. A positive gain on post-test content scores was considered significant if the probability value (p) $\leq$ .005; in Table 9, then, all post-test comparisons were significant for both t and F-tests performed.

The fact that all content areas showed significant post-test gains when the training groups were combined, despite certain content areas not exhibiting this statistical significance within a

training wave, may be due to (1) the increased size of the sample when waves were combined, and (2) the occasional failure to achieve significance usually being marginal. Regardless of how these statistical tests are interpreted, it is clear that for the majority of areas covered, there were positive gains between the pre and post-test scores due to intervening treatment, presumably training and self-study.

Analysis of content scores by supervisory or worker job function. Data for the supervisors who attended the "worker" training groups (Waves I-V, for which data was available) were analyzed separately from workers. For each content area, t and F-tests were performed on pre and post mean scores with Waves I-V combined. Every test, with one exception, indicated significant positive gain scores on the post-test at or below the .05 probability level ($p \leq .05$). The exception to this was the F-test performed on the "Intake, Interviewing and Initial Contact" content area when only supervisors in Waves I-V were considered. Consistent with overall results, absolute scores for supervisors were higher in every content area except for "Dynamics, Child Development and Parenting" for which supervisors and workers scored at approximately the same level on the pre-test and gained approximately the same on the post-test.

Comprehensive Analysis of background questionnaires and CPS knowledge exams. Selected variables from the background questionnaire were further analyzed in a stepwise multiple regression to determine each variables contribution to pre-test and post-test scores.

The following list contains the 27 variables which were tested by multiple regression analysis:

(1) Post-test score
(2) Pre-test score
(3) Supervisor/worker
(4) Age
(5) Sex
(6) Years in current position
(7) Years in CPS
(8) Years in social work
(9) Years as a CPS supervisor
(10) Years as other supervisor
(11) High School degree
(12) Community college degree
(13) Partially completed college degree
(14) BSW
(15) Social science major
(16) Other university major
(17) Partially completed graduate degree
(18) MSW
(19) Other university masters degree
(20) DSW or other doctorate
(21) Number of families in caseload
(22) Number of CPS families in caseload
(23) Number of workers supervised
(24) Number of CPS workers supervised
(25) History of prior CPS training
(26) Wave in which employee participated
(27) Region in which employee worked

For all multiple regression testing discussed here, the dependent variable was the post-test knowledge score.[1] The independent variables selected for a particular analysis varied. The logic of multiple regression analyses, in simple terms, is that: the greater the variance of the dependent variable (post-test in this report) that can be accounted for by selected independent variables (by separately and jointly testing those independent variables), the greater is the ability to predict the level of the dependent

variable (post-test score). If we could measure every independent variable that could conceivably affect the post-test score, then, theoretically we could account for its entire variance and would predict post-test scores perfectly.

The closer values approach 1.00, then, the greater is our knowledge concerning the factors which influence the post-test score. In any test situation individuals bring with them experiences, such as formal education or specialized trianing or on-the-job learning (or possibly age or sex) which can potentially affect scores beyond the influence of comprehensive training itself. Multiple regression analysis allows us to test for these influences (independent variables) and helps us to determine, in this current situation, which influences were significant. Another way of looking at multiple regression analysis is to ask such questions as: (1) Does having a BSW or MSW help an individual score higher on the post-test? (2) Does age or sex influence post-test score? (3) Does on-the-job experience help a CPS worker score higher on the post-test? (4) Does the wave of training in which a worker is assigned affect post-test scores? Or, finally, (5) Does the region in which an employee work affect his or her post-test performance?

The initial multiple regression determined the degree to which the following variables contributed to the variance of the post-test: the pre-test,(2) being either a supervisor or worker,(3) age,(4) sex,(5) job-related experiences,(6-8) caseload,(21-22) and prior training.(25) As would be expected, the pre-test

contributed significantly to post-test variance (R^2=0.67; $F_{(1,275)}$=224.5, p<.001).

Beyond this expected result, the separate contribution of having a B.S.W.(14) was significant ($F_{(1,275)}$=12.98, p<.001), age(4) was significant ($F_{(1,273)}$=7.20, p<.005), having a high school diploma(11) was significant ($F_{(1,273)}$=6.47, p<.025, being a supervisor(9) was significant ($F_{(1,271)}$=6.04, p<.025), the number of CPS families in the caseload(22) was significant ($F_{(1,270)}$=3.92, p<.05) and the number of total families in caseload(21) was significant ($F_{(1,269)}$=4.65, p<.05) in enhancing post-test scores. The other variables such as having an "other major" degree,(16) a social science major,(15) an MSW,(18) time as a supervisor,(9) having "other" masters degrees,(19) time in social work,(8) time as an "other" superviser,(10) or having completed some graduate training(17) did not significantly contribute to the variance on the post-test and, therefore, cannot be viewed as important influences on post-test scores.

The independent variables which contributed significantly to post-test score variance were next put into a stepwise multiple regression with additional variables for each of the five waves and each of the six management regions in Alberta. The question was whether a specific wave (or waves) or a specific region (or regions) may have had significant interaction effects with the post-test results. Of these latter eleven variables, working in the Edmonton Region contributed the "most" to the post-test variance but analysis

of variance indicated there was lack of any significant contribution ($F_{(1,257)}=1.83$, $p<.05$). In summary, post-test results were not affected either (1) by the wave to which the trainee was assigned or (2) to the region in which an employee's office was located. For informational purposes, the percentage of workers who attended training were divided according to the six regions as follows:

Region	Percentage of Trainees
Calgary	21.5
Edmonton	25.3
Northeast	12.8
Northwest	14.3
Central	15.5
South	10.6

Analysis of professional standards survey. The professional standards survey was designed to identify the degree to which workers agreed or disagreed with 15 statements concerning child protective services. Each statement addressed a standard of CPS practice advocated by the American Humane Association. It is important to note that the survey was not designed to establish whether CPS standards actually are met by the Department but, rather, what worker perceptions are regarding policy, procedures, and their own effectiveness within the agency. The intent of the survey is to try to identify potential or perceived barriers for quality practice as identified by workers themselves.

TABLE X

RESULTS OF PROFESSIONAL STANDARDS SURVEY

WAVES I-V, NOVEMBER 1981 TO DECEMBER 1982

Median Response*	Standard Deviation	Statement
3.8	13.9	(1) In my agency, administrators and policymakers are committed to providing child protective services as a unique, specialized social service.
3.1	16.9	(2) In my agency, administrators and policymakers identify with the helping, non-judgmental, non-puntive philosophy of child protective services.
4.5	20.0	(3) Supervisors and workers with whom I come in contact identify with the helping, non-judgmental, non-punitive philosophy of child protective services.
4.1	14.2	(4) In my agency, administrators and policymakers support me and my supervisor's professional decision in child protective cases.
4.2	26.2	(5) In my agency, child protective staff are available to clients 24 hours a day, every day.
0.9	22.1	(6) Because of the emergency, high-risk nature of protective services in my agency, the size of case-loads is carefully controlled.
2.1	10.7	(7) In my local community, resources are available to augment the protective services function.
2.9	13.1	(8) The supervisors with whom I come in contact, support, train, assist and share responsibility with workers.

TABLE X (CONTINUED)

RESULTS OF PROFESSIONAL STANDARDS SURVEY

WAVES I-V, NOVEMBER 1981 TO DECEMBER 1982

Median Response	Standard Deviation		Statement
3.0	14.3	(9)	The supervisors with whom I come in contact, are experienced and helpful.
2.7	15.0	(10)	In my experience, the agency carefully selects workers who exhibit appropriate helping, humanistic attitudes and skills.
2.5	16.7	(11)	Child protection workers are trained rigorously in my agency.
1.5	14.6	(12)	My agency maintains a continuing program of community relations aimed at interpreting child protective services to the community.
1.7	12.3	(13)	Staff scheduling by my agency takes into account that child protective services require a high number of after office hour interviews.
2.5	10.0	(14)	In my agency, my responsibilities as a child protective worker are realistically defined by job description, policy and law.
2.4	12.8	(15)	Child protection in my agency represents a service provided to the community in responding with appropriate feedback to the person making a report of child maltreatment.

*The median response is based on a 5 point scale where 1="disagree" and 5="agree".

Results of this survey are presented in Table 10 and are summarized for employees in all worker waves. Data from supervisors and workers are combined. To the left of each statement are two columns of numbers which show the median response on a five-point scale where "agreement" was equated with a five (5) and "disagreement" was equated with a one (1). The median is the point at which 50% of trainees scored lower or equal to a particular score. In other words, a median response equal to 3.1 means that 50% of respondents indicated moderate agreement with a statement and, a median response of 4.5 would show that 50% of respondents indicated a relatively strong agreement with a statement (i.e., even higher than 4.5).

The standard deviation shown in the second column is a rough measure of the degree of variance for each item and is used only to give a general indication of how "spread out" responses were on the five-point scale. For the purposes here the larger the standard deviation the greater the spread or variability of scores. In Table 10 a standard deviation of 10.0 was low indicating very little spread of response as compared to a standard deviation of 20.0 (Item 3) which showed that workers varied quite a bit in their agreement or disagreement response to this statement.

Results from the professional standards survey present some interesting data on employee perceptions of CPS program functioning in the Department. In a survey of this type where perceptions are measured, a high degree of variability of response is expected. For

this reason the median response is analyzed because it is somewhat less sensitive to widely differing response variability among the statements. Even so, the data indicate some fairly strong feelings for several of the statements. Overall, employees demonstrated moderate agreement to statements concerning agency and individual commitment to child protective services (Item 1, 2, 3, 4, 8, 9, and 10). Employees strongly felt that supervisors they knew were aligned with the helping, non-judgmental, non-punitive CPS philosophy promoted by American Humane in training (Item 3). They were in somewhat less agreement that agency administrators and policymakers were so aligned (Item 2), although part of this difference may be attributed to not having the same degree of contact with individuals who represent "administators" and "policymakers". "Administrators" and "policymakers" were identified as supportive of decisions made by supervisors and workers (Item 4).

Employees indicated that CPS staff are available 24-hours a day (Item 5), although the variance of response was great (standard deviation =26.2). Variability on this item simply may be due to differences in local offices in providing 24-hour a day service to CPS clients, or it may be due to differences in the perceived role among CPS workers in Alberta.

A noteable response to Item 6 concerning caseload control (median response = 0.9) indicates that workers do not generally perceive caseloads as being carefully controlled in the Department. This usually can be interpreted as workers believing their caseloads

are too high or at the minimum not controlled well. In Alberta, actual average caseload size as determined from the individual background questionnaires analyzed, for total families was 42.98 and for total CPS families was 27.26. As was discussed, these figures are higher than the specialized caseload of 20-25 CPS families that American Humane recommends as the upper limit for which CPS families can be adequately served. In Alberta, workers apparently do serve more families; plus, simply in terms of CPS families, workers also carry the upper end of the CPS caseload size recommended. Consequently, workers may be somewhat justified in their concern caseloads are high. On the other hand given the tremendous increase in the number of CPS families reported recently in Alberta, caseloads of 43 should not be surprising. In discussions with the Department, it was apparent administrators were committed to trying to bring mixed caseloads down to 35; this effort is one which should be supported as an ongoing commitment to enhancing quality CPS practice in Alberta and acknowledged as a goal for which the Department should continue to strive. Controlling caseloads demonstrates a strong commitment to the children and families of Alberta that services provided by DSSCH are not unnecessarily diluted by overwhelmed and overworked workers.

There are three statements which concern the community specifically (Items 7, 12, and 15). Item 7 asks to what degree employees see the community as providing supplemental CPS resources (median response = 2.1). Employees tended to perceive community

resources as lacking and were fairly uniform in this belief (standard deviation = 10.7). Item 12 asked to what degree the agency took the responsibility to educate the community about child protective services. The median employee response (1.5) to this demonstrates that employees do not see "DSSCH" as taking responsiblility to educate the public. If this is an accurate perception, the Department may need to determine if it would be in the interest of improving community/DSSCH relations, to initiate such a program. Ultimatley it is clear that the community must be much more involved in child protection if families are going to be helped and child abuse and neglect prevented.

Employees indicated some disagreement (median response = 2.4) whether the department should view the community as a secondary CPS client (Item 15) in providing some response to persons who make reports of child abuse and neglect (doctors, school personnel, neighbors, etc.). Over the course of the training project there was a perceived shift, based on ancedotal feedback in belief on this issue towards more agreement with this statement, but further information on this concept is lacking.

Once again, it is American Humane's concern that CPS professionals must involve the community in helping to prevent child abuse and neglect and that community people deserve some feedback concerning whether "appropriate action has been taken" even though we must strongly maintain confidentiality. If individuals in the community, and this includes teachers, school nurses, and doctors,

do not believe their action to report suspected maltreatment of a child makes any difference, they will be much less inclined to get involved with child protective services in the future.

The final two items for which there is data are 12 and 14. Item 12 asks whether "DSSCH" requires rigorous training of CPS workers (median response = 2.5); employees were mixed in their agreement on this statement, perhaps because they had just finished rigorous comprehensive CPS training provided by American Humane while acknowledging for the most part, this still was the first such rigorous training for workers. Workers might also be unsure that training will be ongoing after this basic course is over. When asked if the position of CPS workers was realistically defined by job description, policy and law in Alberta, employees also were slightly mixed in terms of their perception (median response = 2.5, standard deviation = 10.0). This particular result is hard to interpret. Factors which might be looked at further to better understand this mixed response might include assessing the specificity of the Child Welfare Act; the amount of training workers receive on application of CPS laws and departmental policy; and the specificity of job descriptions for child protection workers and whether these are understood by workers. One area of concern raised in training was that because the Child Welfare Act was broad, some workers felt that screening of intake calls was inappropriate. The consequence of this, of course, is that workers then spend valuable time investigating cases which either may not be child protection or

child welfare cases at all, while time spent with other child welfare cases is thereby reduced. Whether this may exist in Alberta is well beyond the scope of this report, but the issue is a legitimate one in terms of whether quality services can be expected when workers feel it is required to investigate all reports.

Analysis of pre and post worker performance assessments.

The worker performance assessments which were to be completed by supervisors on each worker prior to and following training were structured to encompass "informational areas workers are responsible to know and to apply in practice." Standards for each of the eleven (11) content areas were specified and discussed in this report in Section IV. Assessment ratings were plotted on a five-point scale where "levels" of mastery of knowledge or ability to apply that knowledge were recorded for each individual. Rate of return for completed worker assessments was generally low. On the pre-training assessments there were less than one-third (n=100) that were returned; on the post-training worker performance assessments there were even fewer returned (n=20). A casual survey of supervisors' and workers' comments indicated that among the perceived reasons for the low return of assessments were: (1) not having a supervisor who knew the workers well enough to do the comprehensive assessment; (2) not having the prioritization of the assessments set high enough; and (3) not understanding the purpose of the practicum package which incorporated the worker performance pre and post-assessments. Also included among the various comments was that the worker performance

assessments were perceived as burdensome, especially when other administrative paperwork was considered as well. Finally, some supervisors had difficulty administering pre and post-training worker assessments because they themselves had yet to receive either the comprehensive child protective services training or the specialized supervisory training, or both. This latter, particularly, would present new supervisors with problems of administration since the practicum package and methods of assessing workers were supposed to be thoroughly reviewed during the supervisory training week. It may also account for some of the low return on the practicum materials.

The pre and post worker performance assessment instruments were identical. In each, eleven (11) child protective services content areas were to be evaluated for each worker in terms of "knowledge" and "application" of that knowledge on casework. These "categories" were as follows:

(1) Dynamics
(2) Medical Aspects
(3) Child Development and Parenting
(4) Intake
(5) Initial Contact
(6) Legal Aspects
(7) Client Assessment
(8) Case Planning
(9) Treatment
(10) Case Review
(11) Case Closure

Data were analyzed for all pre and post worker performance assessments which were received by American Humane. Comparison of "overall" pre worker performance assessments to "matched" pre worker

performance assessments (for individuals for which there was also a post worker assessment) is found in Table 11. Difference scores between the overall versus matched pre-training assessment ratings reveal that there is no consistent bias for these two pre-training samples in assessment levels of child protective services knowledge, but that assessment levels of application of child protective services knowledge the greatest discrepancy between all pre-training assessments and the matched pre-training assessments was in the area of "client assessment," followed by "initial contact" and "legal aspects of child abuse and neglect." For application of knowledge, the largest differences were in "client assessment" and "treatment" areas. In each instance, those supervisors who completed both pre and post-training performance assessments on a worker, rated performance lower than supervisors who did not complete post-training worker performance assessments at all. This tendency may indicate that workers in the matched sample indeed were less proficient in some areas, and especially in application of knowledge, or there may exist a sampling bias where supervisors (in the matched sample) who apply more stringent standards in pre-training assessments are also more conscientious in following through with post-training worker performance assessments for their workers.

Comparisons of pre and post median knowledge ratings for individuals for whom both assessments were completed in the

TABLE XI

MEDIAN PRE-TRAINING WORKER PERFORMANCE ASSESSMENTS FOR "OVERALL" VS. "MATCHED" SAMPLE SCORES

CONTENT AREA	KNOWLEDGE			APPLICATION		
	overall pre	matched pre	diff. score	overall pre	matched pre	diff. score
(1) Dynamics	58.7	62.3	+ 3.6	50.9	57.8	+ 6.9
(2) Medical	40.6	35.9	- 4.7	47.3	34.4	-12.9
(3) Child Dev/Par	58.7	66.7	+ 8.0	48.5	53.1	+ 4.6
(4) Intake	70.6	66.4	- 4.2	70.2	59.4	-10.8
(5) Initial Cont.	64.6	48.1	-16.5	58.3	46.9	-11.4
(6) Legal	59.8	49.0	-10.8	61.9	46.9	-15.0
(7) Client Ass.	69.1	42.2	-26.9	63.5	34.4	-29.1
(8) Case Plan.	58.3	60.9	+ 2.6	47.3	35.9	-11.4
(9) Treatment	68.8	61.5	- 7.3	58.8	34.4	-24.4
(10) Case Rev.	61.9	62.5	+ 0.6	56.3	43.8	-12.5
(11) Case Closure	69.5	60.9	- 8.6	69.4	62.5	- 6.9

"matched" group are indicated in Table 12. Simple difference scores and perceived percentage change scores are included in this table to show which content areas were judged to have been most affected by comprehensive training. Three areas (medical, client assessment and initial contact) demonstrate more than a 50 percent gain in knowledge as a result of training (+91.6%, + 79.1%, and + 54.7% respectively). For legal there was a 44.5 percent increase in assessed knowledge, and for all other content areas there was at least a 10 percent increase in assessed knowledge.

TABLE XII

MEDIAN PRE AND POST TRAINING WORKER PERFORMANCE ASSESSMENT RATINGS OF CPS "KNOWLEDGE" ACROSS THE ELEVEN CONTENT AREAS

MEDIAN KNOWLEDGE RATINGS

CONTENT AREA	MATCHED PRE	MATCHED POST	MATCHED DIFFERENCE SCORES	PERCENTAGE CHANGE
(1) Dynamics	62.3	72.2	+ 9.9	+15.9
(2) Medical	35.9	68.8	+32.9	+91.6
(3) Child Dev/Par	66.7	73.3	+ 6.6	+10.0
(4) Intake	66.4	74.2	+ 7.8	+11.7
(5) Initial Cont.	48.1	74.5	+26.4	+54.7
(6) Legal	49.0	70.8	+22.7	+44.5
(7) Client Ass.	42.2	75.6	+33.4	+79.1
(8) Case Plan.	60.9	71.9	+11.0	+18.1
(9) Treatment	61.5	71.9	+10.4	+16.9
(10) Case Rev.	62.5	71.9	+ 9.4	+15.0
(11) Case Closure	60.9	71.9	+11.0	+18.1

Table 13 shows the matched pre and post-training assessments for application of child protective services knowledge across the eleven content areas. This is an important pre and post-training comparison because American Humane believes the strength of any competent professional training is measured by the degree to which such training enhances an employee's ability to apply knowledge on the job. It is this practical orientation that was American Humane's objective to accomplish through it comprehensive training in Alberta. In Table 13, median assessed ratings indicated there was a strong increase in workers' ability to apply child protective services knowledge following training. Ability to utilize child protective services knowledge in practice was particularly marked for the content areas of legal (+43.3%), initial contact (+53.3%), medical (+59.0%), case review (+53.4%), case planning (+93.3%), treatment (+100.0%) and client assessment (+107.8%).

TABLE XIII

MEDIAN PRE AND POST-TRAINING WORKER PERFORMANCE ASSESSMENT RATINGS OF LEVEL OF "APPLICATION" OF CHILD PROTECTIVE SERVICES KNOWLEDGE ACROSS THE ELEVEN CONTENT AREAS

MEDIAN "APPLICATION" RATINGS

CONTENT AREAS	MATCHED PRE	MATCHED POST	MATCHED DIFFERENCE SCORES	PERCENTAGE CHANGE
(1) Dynamics	57.8	75.0	+17.2	+ 29.8
(2) Medical	34.4	54.7	+20.3	+ 59.0
(3) Child Dev./Par	53.1	65.0	+11.9	+ 22.4
(4) Intake	59.4	73.1	+13.7	+ 23.1
(5) Initial Cont.	46.9	71.9	+25.0	+ 53.3
(6) Legal	46.9	67.2	+20.3	+ 43.3
(7) Client Ass.	34.4	71.5	+37.1	+107.8
(8) Case Plan.	35.9	69.4	+33.5	+ 93.3
(9) Treatment	34.4	68.8	+34.4	+100.0
(10) Case Rev.	43.8	67.2	+23.4	+ 53.4
(11) Case Closure	62.5	71.9	+ 9.4	+ 15.0

There was a pronounced tendency to assess workers' levels of child protective services knowledge higher than their ability to apply that knowledge in practice. This can be seen in Table 14 and in Figure 3. In Table 14 a positive difference score would indicate a higher knowledge than application level. Table 14 shows only two instances where assessed ability to apply child protective services knowledge exceeded the assessed level of child protective services knowledge (shown as minus values): (1) case closure in pre-training (-1.6), and (2) dynamics in post-training (-2.8). For case closure in post-training there was no difference in "median" ratings for knowledge and application (0.0). Otherwise, for all other content areas, level of knowledge was assessed higher than level of application (see Table 14) and this discrepancy was larger prior to training than following training (see Figure 3). Prior to training, as can be seen in Table 14, those child protective service practice areas covering case planning, treatment, and case review, particularly, show that application levels lagged behind knowledge levels (difference scores of +25.0, +27.1, and +18.7, respectively, in favor of higher knowledge levels). Child development and parenting (+13.6) and case review (+18.7) also indicate large difference scores in favor of knowledge over application levels. Finally, following training this knowledge versus application "discrepancy" was generally reduced as indicated, except for content areas covering (1) medical aspects where there was an even more marked discrepancy, (2) initial contact, (3) legal aspects, where

TABLE XIV

COMPARISON OF MEDIAN KNOWLEDGE AND APPLICATION SCORES
FOR ALBERTA WORKER PERFORMANCE ASSESSMENTS

	PRE-TRAINING			POST-TRAINING		
	KNOWLEDGE	APPLICATION	DIFF. SCORE	KNOWLEDGE	APPLICATION	DIFF. SCORE
(1) Dynamics	62.3	57.8	+ 4.5	72.2	75.0	- 2.8
(2) Medical	35.9	34.4	+ 1.5	68.8	54.7	+14.1
(3) Child Dev/Par	66.7	53.1	+13.6	73.3	65.0	+ 8.3
(4) Intake	66.4	59.4	+ 7.0	74.2	73.1	+ 1.1
(5) Initial Cont.	48.1	46.9	+ 1.2	74.5	71.9	+ 2.6
(6) Legal	49.0	46.9	+ 2.1	70.8	67.2	+ 3.6
(7) Client Ass.	42.2	34.4	+ 7.8	75.6	71.5	+ 4.1
(8) Case Plan.	60.9	35.9	+25.0	71.9	69.4	+ 2.5
(9) Treatment	61.5	34.4	+27.1	71.9	68.8	+ 3.1
(10) Case Rev.	62.5	43.8	+18.7	71.9	67.2	+ 4.7
(11) Case Closure	60.9	62.5	- 1.6	71.9	71.9	0.0
AVERAGE	56.0	46.3	+ 9.7	72.5	68.7	+ 3.8

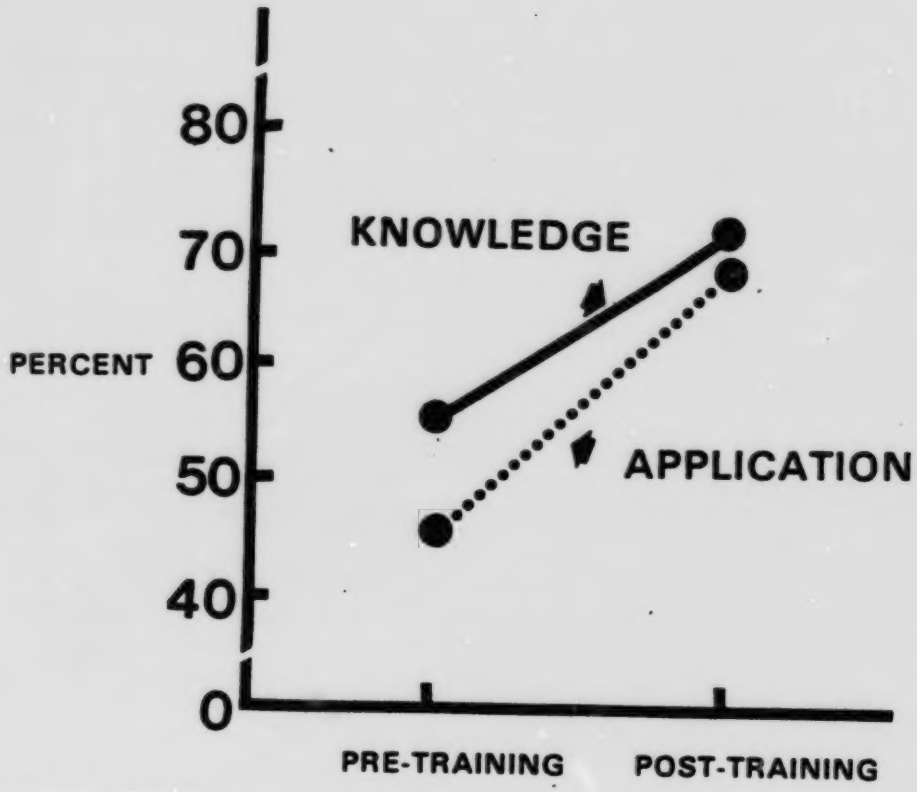


FIGURE 3

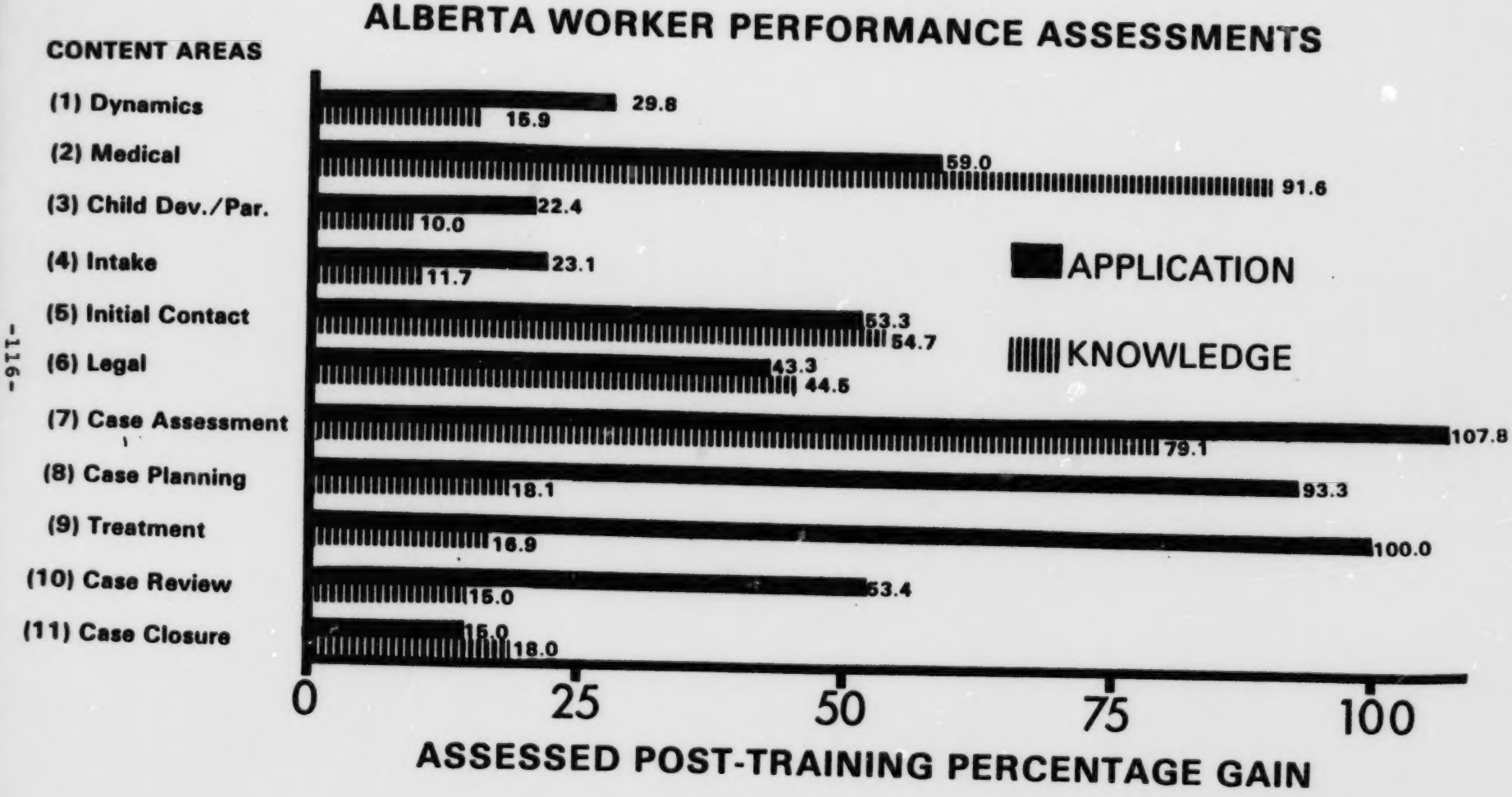
Alberta worker performance assessment average median ratings for matched sample across all content areas

differences following training were only slightly higher for these. One should also note that there was a dramatic absolute improvement for knowledge and application for each area as well, which must be balanced with any interpretation of the difference scores.

That supervisor's indicate that workers know more than they apply in practice is best summarized in Figure 3. In this figure, median percentage ratings were averaged for all content areas, and a single value was plotted for knowledge and application levels. Values are compared prior to and following comprehensive child protective services training. Although application of child protective services knowledge does not quite "catch up" to knowledge levels, a trend toward reducing the knowledge/application disparity is evidenced.

Bar graph data are presented in Figure 4 which summarize the assessed percentage gain for each content area. Each percentage gain score is plotted separately for knowledge level and for level of application of that knowledge. Again, as has been found throughout, worker performance assessment ratings differed for knowledge and application. In Figure 4, as with previous data, it is clear that percentage gain scores were often higher and sometimes much higher for post-training application levels. Content areas such as dynamics (1), child development and parenting (3), intake (4), case assessment (7), case planning (8), treatment (9), and case review (10) illustrate this pronounced increase in ability to apply knowledge. Absolute knowledge levels showed the most increase for

FIGURE 4


ALBERTA WORKER PERFORMANCE ASSESSMENTS
CONTENT AREAS
(1) Dynamics
(2) Medical
(3) Child Dev./Par.
(4) Intake
(5) Initial Contact
(6) Legal
(7) Case Assessment
(8) Case Planning
(9) Treatment
(10) Case Review
(11) Case Closure
29.8
15.9
59.0
91.6
22.4
10.0
23.1
11.7
53.3
54.7
43.3
44.5
107.8
79.1
18.1
93.3
16.9
100.0
15.0
53.4
15.0
18.0
APPLICATION
KNOWLEDGE
0
25
50
75
100
ASSESSED POST-TRAINING PERCENTAGE GAIN

the medical (2), initial contact (5), legal, (6) and case assessment (7) content areas.

In summary, worker performance assessments showed that supervisors generally rate workers lower on their ability to apply specific child protective services knowledge than on their level of mastery of that knowledge, but that difference is less following comprehensive child protective services training. Moreover, those areas in which ability to apply knowledge are helped the most by training are practice areas which are emphasized the most in comprehensive training. Finally, the most general summary statement is that training apparently has a major impact on increasing child protective services knowledge and ability to apply that knowledge as assessed by supervisors.

Analysis of the Practicum Plan, Results, and Practicum Evaluation.

Earlier discussion in this report concentrated on the low return for certain comprehensive evaluation instruments. Unfortunately the most significant loss was in the 2% return recorded for the practicum and evaluation of the practicum instruments. The extrememly large number of supervisors who did not complete the practicum with their workers apparently resisted the task, at least in terms of its priority in the heavily-demanding workload of child protective supervisors. As indicated, one purpose of the practicum is to provide a structured interaction for the supervisor and worker in which mutually identified problems are discussed, in an environment which is supportive and designed to enhance professional

growth for the worker. Supervisors often tend to view themselves less as "helpers" than as "administrators," at least in terms of how they prioritize their time, and the low completion rate for the practicum may illustrate this conflict.

The few practicum packages which were returned to American Humane, which presumably were from highly motivated superviors to be sure, were extremely well done. Examples of learning areas selected by workers and supervisors included some of the following: (1) to review several files and set up a treatment plan for each family, (2) to practice interviewing skills with children, (3) to take a case and determine which developmental stage a child was in relative to developmental norms, (4) to determime where a parent fits in the "world of abnormal rearing "cycle (which was covered in dynamics), (5) to outline a case plan and identify treatment techniques to be used, (6) to increase the use of positive therapist behaviors in hopes a client will model those behaviors, (7) to list indicators of child abuse and neglect (from dynamics) for one particular family, (8) to determine the methods of discipline for two native families and relate these techniques to effective parenting standards, (9) to gather information on worker liability cases in Alberta which focuses on the social work profession, (10) to assess a Cree family in terms of verbal and non-verbal interaction and parenting techniques, (11) to determine the criteria one worker uses to remove a child from the home, and (12) to determine how to teach a parent how to child-proof the home. One worker completed a review paper on

the physical, emotional and intellectual development of infants up to one year of age.

These many examples exemplify the potential usefulness of the practicum. With enough effort on the part of supervisors and workers, the practicum experience could be extremely positive, related to professional growth, and could provide a helping supervisory atmosphere in which the important decisions in child protective services could be shared. The majority of learning areas selected for the practicum, as can be seen from the listed examples, were areas essential to minimally adequate casework. Workers should have treatment plans for every client, they should be extremely aware of criteria they use for removal of a child from a home, they should assess the developmental level of the child to risk. In short, workers who did complete the practicum may do better case recording and higher quality casework as a result of having formally used knowledge gained in training.

The very few evaluations of the practicum received by American Humane came, for the most part, from the same workers and supervisors who completed the practicum problems. This small sample was strongly supportive of the learning potential of the practicum, was committed to the practicum, applied curriculum content in the practicum, indicated the practicum was not intimidating, and believed that the practicum was conducted in a supportive climate. However, even amoung those who did complete the practicum evaluation there was a split in response to the statement "this practicum would

be useful as a continuing supervisory tool". Some felt it would be highly useful, others felt it would not. Additional comments on the practicum problems included statements that: (1) they (the practicum problems) were good ways to translate theory into practice (the original intent), (2) more implementation time was needed, (3) lessened caseload demands were required while the practicum was in place, and (4) there was a need to reduce the length of the practicum.

In as many ways as possible it seems that workers and supervisors were saying that the practicum idea is useful but overly time-consuming. In the overall scope of child protection this structured teaching format for Alberta supervisors to use with Alberta workers was not viewed as a high priority or essential to the effectiveness of the child protective services worker (or supervisor).

The practicum portion of the training was concluded following Wave IV by mutually agreement of AHA and DSSCH, after is was determined that there was a major problem in return rate for the field problems. Staff of DSSCH have revised the practicum for use in Wave V and Wave VI (Co-training). Revisions of the practicum by DSSCH incorporated greater structure for the field problems, a higher level of control over completion of the practicum, and highly structured discussion groups who reviewed completed practicum problems. The objection of increasing supervisor/worker interaction time was, thus, maintained and perhaps will provide the format

necessary for positive growth-related experiences associated with child protective services supervisory conferences. American Humane strongly supports the Department's commitment to the practicum and hopes DSSCH staff now in charge of the evaluation for Alberta have been successful in implementing the practicum as revised. Problems identified in the practicum instruments returned are crucial to effective casework and some opportunity must be given to workers to practice newly gained child protective services knowledge for it to become useful or mastered.

Analysis of employee evaluation of trainers and training sessions: Overall ratings by workers and supervisors, Waves I-V.

As was the case for all training done in the Spring, 1981, each content session during Waves I-V was separately evaluated by every employee. Data presented in Table 15 represent the average ratings for each of ten statements, scored on a nine-point scale. There were three assessment categories: "poor", "average", and "good"; and three levels written each category: "low", "mid", and "high" (see Appendix H). Consequently, the highest rankings which could be associated with a statement was a nine ("high"/"good") and the lowest ranking was a one ("low"/"poor"). In addition to summarizing these ten statements listed in Table 15, ratings were analyzed for each of two additional statements regarding the employees' opinions about (1) the quality of the "overall session" (excellent, good, adequate or poor), and (2) the quality of the facilities (excellent, good, adequate, or poor).

TABLE XV

AVERAGE EMPLOYEE RATINGS OF ALL SESSIONS, WAVES I-V.

Evaluated Statements	Mean* Rating
1. Coverage of material.	7.8
2. Interest and challenge of content.	7.7
3. Relevance and practicality of content.	8.0
4. Objectives stated and consistent with content.	7.8
5. Achievement of objectives.	8.2
6. Organization and preparation of trainer.	8.2
7. Trainer's knowledge.	8.5
8. Trainer's enthusiasm.	8.4
9. Trainer's sensitivity to needs of group.	7.9
10. Degree to which teaching methods enhanced learning.	7.5

*Highest rating = 9; lowest rating = 1.

The mean rating for these 10 statements for all sessions was 8.0 on the 9.0 scale, or 89% of the maximum rating possible. This score is found based on over 2200 employee evaluations.

When opinions on the quality of the "overall session" were analyzed, 53.2% of the employees rated all sessions as "excellent," 39.5% rated sessions a "good," 6.8% rated sessions as adequate, and 0.5% rated sessions as "poor". This particularly strong support for the faculty presentations is in agreement with the average scaled ratings mentioned above.

Finally, opinions regarding the facilities in which training was held were as follows: 17.3% felt the facilites were "excellent," 42.0% felt the facilities were "good," 31.0% felt the facilities were "average," and 9.7% felt the facilities were "poor."

Combined ratings for different content sessions.

Employee evaluations were analyzed for each individual content area as well. Table 16 presents the mean ratings for each of the ten statements listed:

TABLE XVI

AVERAGE EMPLOYEE RATINGS OF SESSIONS BY CONTENT AREA FOR TEN INDIVIDUAL STATMENTS, WAVES I-V

EVALUATED STATMENTS*

	1	2	3	4	5	6	7	8	9	10
Dynamics	7.6	7.5	8.0	7.6	7.5	8.1	8.3	8.1	7.6	7.1
Medical	8.3	8.1	8.3	8.3	8.2	8.6	8.7	8.3	8.1	7.8
Child Dev./Par.	7.5	7.1	7.8	7.8	7.5	8.0	8.3	8.2	7.8	7.2
Intake	7.6	7.4	7.8	7.7	7.5	8.1	8.4	8.3	7.8	7.5
Legal	7.8	8.1	8.1	7.6	7.8	8.3	8.7	8.4	8.0	7.8
Casework	7.8	7.8	7.8	7.8	7.8	8.3	8.4	8.5	7.9	7.7

*Refer to Table 15 for wording of statements; values are based on the 9-point scale where 9 = highest and 1 = lowest.

The average mean rating (on the nine-point scale) for each content area is summarized in Table 17 below. The average ratings cover all five training waves and are based on more than 2200 evaluations.

TABLE XVII

AVERAGE EMPLOYEE RATINGS* BY CONTENT AREA
FOR THE FIVE "WORKER" TRAINING WAVES COMBINED.

Dynamics	7.7
Medical	8.3
Child Dev./Par.	7.7
Intake	7.8
Legal	8.1
Casework	8.0

*Values are based on the 9-point scale where 9 = highest and 1 = lowest.

Tables 15 and 16 indicate that sessions attended over Waves I-V were highly regarded by employees. Scores were recorded for statements concerning the "relevance and practicality of content "(8.0), "achievement of objectives" (8.2) "organization and preparation of trainer (8.2), and trainer's "knowledge" (8.5) and "enthusiasm" (8.4).

The overall average ratings for each content area across all five training waves, as seen in Table 17, show that the lowest mean score for a content area was still at least 86% of the maximum response possible.

This can be analyzed further in Table 16 where individual statements are evaluated. Virtually all mean scores evaluated for statements concerning "organization and preparation of trainer" (6), "trainer's knowledge" (7), and "trainer's enthusiasm" (8) were above 8.0 or above 89% of the maximum ratings possible. In the medical presentations rankings for nine of the ten statments were over 8.0. In dynamics and legal areas, "relevance" and "practicality" of material were highlighted (8.0 and 8.1, respectively); and the legal presentations were found to be especially "challenging" and "interesting" to employees (8.1). Despite highlighting these particularily high rankings the lowest mean rating for any statement, any content area, was still over 7.0, nearly 80% of the highest maximum rating possible. In short, employee evaluations were highly supportive of the entire training effort and, moreover, were consistent for all ten evaluation statements.

Over all five training waves there was remarkable consistency in employee evaluations as demonstrated in Table 18 for within each content area and within each wave of training. The average evaluation rankings of sessions, on the nine-point scale, were as follows: Wave I (7.9), Wave II (7.9), Wave III (8.0, Wave IV (7.9), and Wave V (7.9). The single presentation which was rated "highest" was the medical session in Wave IV (8.5), the "lowest" rated sessions (7.6) were dynamics (Wave I), child development and parenting (Wave V), intake (Wave I) and legal (Wave V). Once

again, however, it should be clarified that even the lowest rating (7.6) would indicate a strong presentation in absolute terms, in that such a rating is within 84% of the maximum (highest) rating possible.

TABLE XVIII

AVERAGE EMPLOYEE RATINGS* BY WAVE
AND CONTENT AREA, NOVEMBER 1981 TO DECEMBER 1982.

	Training Groups (Waves)				
	I	II	III	IV	V
Dynamics	7.6	7.8	8.0	7.4	8.0
Medical	8.1	8.4	8.3	8.5	8.1
Child Dev./Par.	7.8	7.7	7.7	7.8	7.6
Intake	7.6	7.7	8.1	7.5	8.1
Legal	8.2	8.1	8.2	8.3	7.6
Casework	8.1	7.9	7.9	8.1	8.0

*Ratings are based on a 9-point scale where 9 = highest and 1 = lowest response.

VIII. EVALUATION OF SUPERVISORY SESSIONS.

There was no evaluation component built into the supervisory sessions in terms of measuring pre and post workshop knowledge and skills with the exception of feedback from employee evaluation data. The pre and post supervisory assessments were designed to capture the effects of the specialized supervisory workshop on the the amount of time the supervisor spends with his or her supervisee, but only total supervisory self assessments were returned to American Humane. Consequently, although the question of whether interaction time increased between supervisors and workers as a result of training cannot be assessed in this report, employee ratings of the four supervisory workshops are included.

The overall mean rating for all four supervisory sessions was 7.3 (all scores were transformed for a nine-point scale). Mean rating scores for individual sessions ranged from a low of 5.8 to a high of 8.7. (The four session means, respectively, were 5.8, 7.8, 8.7 and 6.9, respectively). In the first training session identified problems included inappropriate expectations, inadequate use of case examples, perceived elementary nature of material and perceived inadequate knowledge of DSSCH. Identified strengths of the first session were the level of group involvement, preparation of the trainers, and communication skills exhibited by the trainers. The average rating for this session would put it into the mid to high category of the "average"range.

Following this session, adjustments were made to the supervisory curriculum to reduce the amount of time spent on one self awareness exercise, to increase content relevant to interactional skills between supervisors and workers, and to increase the amount of time familiarizing supervisors with the practicum instruments. In addition, the employee evaluation form was dropped in favor of the employee evaluation form used in core training with workers.

The second and third supervisory sessions were judged to be considerably more effective (7.8 and 8.7, respectively), specifically in terms of good use of relevant case examples, use of the self-evaluation tools presented, design of the workshop, and content of material presented. Comments listed for these two sessions included: "rewarding session", "long overdue," and "excellent learning tool for me personally." Suggestions for improvement included spending more time on case supervision, demonstrations and better facilities.

The final session is somewhat difficult to analyze in terms of the employee evaluations. The overall session was rated between "average" and "good" (6.7) which was lower than the previous two sessions. Remarks concerning the trainer's characteristics were extremely positive, supportive and supervisors were uniformly appreciative of the effort. Several supervisors commented on the fact the instructor "had to work alone" instead of with another faculty member as in previous sessions. Some comments concerned the

utilization and practicality of the practicum, the inadequacy of the facilities, and emphasis on appropriate social work skills which were felt to be already in place.

Strong supervisory training is essential in child protective services. The department is already in the process of redesigning the supervisory training to strengthen it based on feedback from the training which already has been completed. One factor which may enhance future supervisory training is the redesigning of the practicum to better meet the needs of supervisors and workers in Alberta.

The two supervisory sessions which were rated highly, sessions 2 and 3 (ranked 7.8 and 8.7, respectively) need to be considered the best models for this training. Concepts which need to be incorporated into future training include (1) teaching to the level of the supervisor in training, (2) extensively using relevant case examples, (3) strong, overt organization of the entire week, and (4) a very thorough understanding of the practicum instruments and the critical need for their implementation. Supervisors must be convinced of the importance of their rote as facilitator, helper and teacher to their child protective services workers. The job of child protection worker requires extensive supervisory support, and it is this concept, more than any other which needs to be emphasized, incorporated and consequently "believed" in supervisory training. Trainers of supervisory sessions need to work hard to convey the importance of the supervisory helping role.

IX. CO-TRAINING (WAVE VI) AND BRIEF ANALYSIS OF TRAINING CONDUCTED BY DSSCH STAFF (WAVE VII).

The formal evaluation of comprehensive training conducted by American Humane only encompassed training waves in the Spring, 1981, and Waves I-V from November 1981 to December 1982. Co-training by DSSCH and American Humane faculty in Wave VI, and training by DSSCH trainers in Wave VII overlapped, to some extent, the last weeks of contractual obligations held by American Humane. Since American Humane staff co-trained with DSSCH staff in Wave V, evaluations of training sessions were sent to American Humane for analysis. The majority of evaluations of the DSSCH training in Wave VII were also sent to American Humane for review. Since the information was available, a brief and informal summary of DSSCH employees' response to these training sessons in included here.

The transfer of training capabilities to DSSCH was a major component of the comprehensive training effort in Alberta. There was a stong investment by both the Alberta trainers and the American Humane staff and faculty towards implementing the strongest training program possible for child welfare workers in Alberta. Co-training in Wave VI involved the pairing of American Humane and DSSCH trainers in sessions of approximately 25 participants each. Prior to the training, the roles of the individual trainers were specified, material was divided and agendas were developed. The three-week model of training was continued, but the total training group size was reduced to 50, down from approximately 75, to enhance the

experiential nature of the training. This particularly enhanced the first week of training where workers formerly had been assigned to larger groups primarily for economy reasons. The smaller groups potentially were more motivated and involved in Waves VI and VII due to the smaller sizes of training groups.

In co-training the sessions were rated by employees, as they were during Waves I-V. Ratings were comparably high. Comments indicated workers were pleased to have Alberta training staff involved in training, enjoyed the team teaching approach and found the curriculum relevant and useful. Actual averages for ratings, for the nine-point scaled forms, ranged between 7.5 and 8.3.

In Wave VII, American Humane observers were present in sessions, but DSSCH trainers were entirely responsible for delivery of material, responding to questions and conducting all exercises. Again, the sessions were rated well by the participants who were generally supportive of the presentations (although not as supportive of facilities). Feedback given to some Alberta trainers by American Humane observers included stategies on how to feel more comfortable and assertive in their groups, tips on how to better use some of the films and tapes, and advice on how to strengthen some of the groups exercises. Besides these few areas identified in some sessions, the Alberta training staff was generally well organized, well prepared, made good use of time and had prepared quality visual aids. Extremely good use of handouts was noted for several of the trainers. Not all evaluated sessions were available for analysis,

but of the nine DSSCH training sessions which could be summarized, all were rated in the "good" (67%) to "excellent" (33%) categories. When only the "practice" areas were considered the overall rankings of sessions by employees was 7.4, on the nine point scale; the legal and medical sessions likewise, were rated at an average of 7.4 on the nine-point scale. Evaluation scores ranged from 6.8 to 8.2 for Wave VII sessions (for which employee ratings were available).

The comprehensive child protective services training curriculum was appropriately delivered by DSSCH training staff. Alberta trainers were found to be capable, sensitive to the needs of workers in the Department, and highly motivated to deliver quality professional training for adult learners. Several of the Wave VII sessions were rated particularly high for their trainer's ability to engage employees in active problem solving and child protective services skills development.

The future of the comprehensive child protective services training project in Alberta is assured, providing training remains a priority in the Department and Alberta training staff continue to develop in confidence and experience. New child welfare employees who are willing to invest will benefit tremendously from DSSCH'S commitment to the specialized, basic child protective services training now provided by its own training staff.

X. SUMMARY OF EVALUATION RESULTS AND RECOMMENDATIONS.

The effectiveness of the American Humane comprehensive child protective services training project primarily was analyzed in two sections in this report: (1) the two training waves of supervisors and administrators in the Spring, 1981 (Section VI); and (2) training of workers and a few supervisors in Waves I-V, from November 1981 to December, 1982 (Section VII). Data from background questionnaires, pre and post-tests of child protection knowledge delivered in training, and results of surveys regarding child protection practices were analyzed and subjected to statistical tests.

Additional analyses were conducted to determine if supervisors were able to detect in their line workers a noticeable change in the level of mastery of child protection knowledge workers held following training, and whether workers improved in their ability to utilize this knowledge in practice.

Particular emphasis in this report concerned what level of child protective services knowledge existed prior to training for DSSCH employees and how that knowledge was affected by the training project.

Who participated in training?

Child welfare employees who worked with DSSCH child protection staff or with Albertan families involved in abuse or neglect of their children, attended the comprehensive training. Approximately 357 line staff, 92 of their supervisors and 24 DSSCH administrators

were involved in the basic three week curriculum designed to enhance casework knowledge and skills regarding child protective services. If the number of contact hours with American Humane faculty are combined for all participants, DSSCH employees received a total of 235,554 hours of training, representing a tremendous commitment on the part of the Department and its employees to enhance the quality of child protection practice in Alberta. Supervisors received additional specialized training for a combined total of about 8000 contact hours beyond comprehensive training.

Proportionately, there were more males in the training which occurred in the Spring, 1981 (when supervisors and administrators only were involved), than was found for line workers and supervisors attending Waves I-V somewhat later. The majority of all participants were 25 years of age or older with the median age being over 30 years for all employees who attended training.

What was the level of professional experience for employees who attended training?

The education background of supervisors and administrators attending training in the Spring, 1981 is compared to employees (primarily workers) who attended one of the training groups in Waves I-V below:

TABLE XIX
EMPLOYEE EDUCATIONAL BACKGROUNDS COMPARED

	Spring 1981 (Waves I and II)	November 1981 to December 1982 (Waves I-IV)
BSW	15.4%	44.8%
MSW	11.0%	8.7%
Social Sceince Degree	20.9%	14.4%
Master's Degree	6.6%	2.9%
Other Acedemic degrees	46.1%	29.2%

More than two-thirds of the employees who attended training between November 1981 and December, 1982 held academic degrees relevant to child protective services while nearly half of the Spring, 1981 employees in training had relevant degrees. Both groups indicated that prior to the comprehensive training project there had been little to no opportunity in their professional practice to attend specialized child protective services training.

What was the job experience for DSSCH employees who attended training?

Supervisors and administrators involved in the Spring, 1981 training had fairly extensive child protective services and general social work experience with the vast majority having held their current position for more than one year. Nearly half of this group had more than five years of child protective services supervisory experience, and many had an additional three years of other supervisory experience. Supervisors had between five to eight line workers whom they supervised. Line workers generally indicated they had held their current job for over one year, had around two-

and-a-half years experience in child protection, and had been involved in social work practice for almost five years. Line child protective services workers in Alberta were estimated to carry about an average of 43 families in their caseload, of which about 27 families were considered to be strictly child protection cases.

What were the effects on knowledge gain as the results of training?

There were positive significant changes in the amount of child protective services knowledge for DSSCH employees which can be attributed to training. Significant gains were found for both supervisors and administrators in the Spring, 1981; and for workers and supervisors in training from November 1981 to December 1981.

Knowledge gain was also assessed for the following content areas: (1) dynamics, child development and parenting; (2) intake, interviewing and initial contact; (3) assessment, case planning and case review; (4) treatment; and, (5) legal and medical aspects of child abuse and neglect. Consistent gains in knowledge were indicated for all content areas and all groups of training. On supervisory assessment of knowledge gain in workers there were pronounced effects of training especially for the content areas of medical aspects, initial contact, legal, and case assessment.

Even more dramatic were the results of supervisory assessments of workers' ability to apply certain knowledge content: medical, initial contact, case assessment, case planning, treatment, and case review were areas in which workers improved more than 50 percent.

How did DSSCH employees rate the training sessions?

Some of the strongest indications that the comprehensive training project was effective came from evaluations completed by DSSCH employees, themselves, for each session attended in the curriculum. In all, there were more than 2800 such evaluations completed and analyzed.

Evaluations are summarized in Table 20 for all sessions by content areas. Numbers are based on a nine-point scale where nine (9) indicated the highest score possible and one (1) indicated the lowest score possible.

TABLE XX

EMPLOYEE RATINGS* OF SESSIONS COMPARED

	Spring, 1981 (Waves I and II)	November, 1981 to December, 1982 (Waves I-V)
Dynamics	8.0	7.7
Medical	8.4	8.3
Child Dev./Par.	8.1	7.7
Intake	7.7	7.8
Legal	8.5	8.1
Casework	8.5	8.0

*Where 9 = highest and 1 = lowest rating possible

Employees found the training to be highly relevant, presentations well-organized, and trainers skilled in teaching. There was strong consensus that trainers knew child protective services, were able to convey that knowledge, and were sensitive to the needs of the group.

What were the results of the survey completed by DSSCH employees?

Employees were found to possess highly appropriate attitudes towards clients and their role as child protection professionals. Line workers felt they and their immediate supervisors held non-judgmental and non-punitive attitudes toward families involved in child abuse and neglect, an important basis for effective intervention with child protective services families. Other data generally revealed that opinions of workers, supervisors and administrators reflected attitudes in line with professionally accepted child protective services practice standards.

To what degree was capacity for maintaining the comprehensive child protective services training project transferred to DSSCH?

The complete capacity for maintaining the comprehensive child protective service training project has been successfully transferred to the Department of Social Services and Community Health. Training already has been undertaken by Alberta trainers and evaluation of that training is currently underway. Preliminary feedback from the training sessions suggest that DSSCH employees are receiving the training well.

What are the recommendations of the American Humane Association concerning future training in Alberta?

American Humane applauds the Department of Social Services and Community Health for having undertaken a project of this size. The training project represents a tremendous commitment of time and energy on the part of its staff and reflects a deep commitment to

providing quality service to the families and children of Alberta. There are a few recommendations that can be made:

(1) For the impact of training to reach its potential, all new child welfare workers must have the opportunity to attend this basic child protection comprehensive training. Turnover rates among child protection professionals tend to be high and only through a stong and on-going training program can even minimal knowledge levels and practice skills be maintained. There will always be employees who will benefit from the basic comprehensive training which DSSCH now provides. Basic training, then, needs to be kept as a deparmental prioity.

(2) The evaluation of training needs also to be maintained. It too reflects a major commitment of resources, but it is invaluable in providing feedback about employees' needs for advanced training, in providing for the level of accountability needed to maintain a quality and effective program, and for determining areas of child protective services practice which may need to be enhanced. As was apparent in this report, an evaluation component even may be useful in tracking program concerns such as changes in caseload size, supervisor to worker ratios, employee attitudes about the field of child protection, and amount of child protective services

training and educational background of departmental employees. It is recommended that an evaluation component accompany all future training for these reasons.

(3) There was strong evidence that supervisors felt their workers benefitted more than simply increasing their absolute knowledge levels as a result of training, although this is essential. Workers, who were assessed by supervisors, apparently benefitted the most in being able to utilize or apply this knowledge in their casework. This is an important finding since it is the ultimate goal of comprehensive training to enhance job performance. While supervisory assessments are useful, the bridge between training and job performance needs to be thoroughly analyzed. One possible recommendation would be to consider conducting an agency program evaluation with this specific goal as a focus, where selected offices are chosen, records are reviewed, workers and supervisors are interviewed, and possibly worker effectiveness with clients is directly or indirectly measured. The main purpose of such a program evaluation would be to measure the effectiveness of training in actual practice, thus increasing agency knowledge about strengths of the training program and, in turn, increasing agency accountability for allotment of staff and resources.

(4) Comprehensive training in child protective services provides for workers a common knowledge base, a common language system for communicating with other professionals, and the minimal skills needed for adequate casework practice. Workers will continue to need specialized training on an advanced level to maintain and enhance their practice skills. Opportunity to attend such advanced training is needed in Alberta, possibly building on areas identified in this report for special emphasis. The department may, in the future, even wish to consider potential certification of line workers involved in child protective services based on training they have received and various job performance indicators.

(5) Finally, in order to maintain program effectiveness, strong support of child protective services supervisors needs to be continued as a DSSCH priority. The level of commitment to supervisory training is one available avenue of such support, and DSSCH is to be commended for already planning for more of this training. It is recommended that supervisors be given, then, on-going administrative support for taking on the supervisory role of facilitator, helper, and teacher to their line workers. This supervisory role is essential to increasing the capacity of line workers to effectively intervene with maltreating families whose motivation to change is often low.

Supervisors are central to quality delivery of child protective services and deserve and require strong administrative support to be effective.

XI. APPENDICES

APPENDIX A:

SCHEDULE OF TRAINING SESSIONS
SPRING 1981-DECEMBER 1982

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WAVE I - SPRING 1981

TRAINER	SESSION	DATE
THELMA BAILY	DYNAMICS	4-14-81
DAVID KERNS	MEDICAL ASPECTS	4-13-81
JULES RILEY/KATHLEEN HAYES	CHILD DEVELOPMENT/PARENTING	4-16-81
THELMA BAILY	INTAKE/INTERVIEWING	5- 6-81
BETH PHILBRICK	INTAKE/INTERVIEWING	5- 6-81
SOL GOTHARD	LEGAL ASPECTS	5- 6-81
FRANK HARRIGAN	LEGAL ASPECTS	5- 6-81
DONNA AUSTIN	CASEWORK	6- 7-81
JIM CODEGA	CASEWORK	6- 7-81

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WAVE II - SPRING 1981

TRAINER	SESSION	DATE
CHRIS MOUZAKITIS	DYNAMICS	4-27-81
DAVID KERNS	MEDICAL ASPECTS	4-28-81
JULES RILEY/KATHLEEN HAYES	CHILD DEVELOPMENT/PARENTING	4-27-81
PAT LOCKETT	INTAKE/INTERVIEWING	5-19-81
KATHY MC GILVRAY-WOOTEN	INTAKE/INTERVIEWING	5-19-81
VINCENT DE FRANCIS	LEGAL ASPECTS	5-21-81
SOL GOTHARD	LEGAL ASPECTS	5-21-81
ROBERT BUCHICCIO	CASEWORK	6-22-81
MIKE COREY	CASEWORK	6-22-81

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WORKER WAVE I - FALL 1981

TRAINER	SESSION	DATE
TIMOTHEA LEWIS	DYNAMICS	11- 3-81
AMY KERNS	DYNAMICS	11- 3-81
DES RUNYAN	MEDICAL ASPECTS	11- 4-81
KATHLEEN HAYES	CHILD DEVELOPMENT/PARENTING	11- 5-81
SANDRA KAY FELT	CHILD DEVELOPMENT/PARENTING	11- 5-81
THELMA BAILY	INTAKE/INTERVIEW	1-13-82
CHRIS MOUZAKITIS	INTAKE/INTERVIEW	1-13-82
PAT LOCKETT	INTAKE/INTERVIEW	1-13-82
SOL GOTHARD	LEGAL ASPECTS	1-15-82
VINCENT DE FRANCIS	LEGAL ASPECTS	1-15-82
FRANK HARRIGAN	LEGAL ASPECTS	1-15-82
DONNA AUSTIN	CASEWORK	2-26-82
MIKE COREY	CASEWORK	2-26-82
BETH BRIDGMAN	CASEWORK	2-26-82

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WORKER WAVE II - WINTER 1981

TRAINER	SESSION	DATE
CHRIS MOUZAKITIS	DYNAMICS	12- 8-81
TIMOTHEA LEWIS	DYNAMICS	12- 8-81
DAVID KERNS	MEDICAL ASPECTS	12- 9-81
MARY FRANEK	CHILD DEVELOPMENT/PARENTING	12- 8-81
KATHLEEN HAYES	CHILD DEVELOPMENT/PARENTING	12- 8-81
TOM CRUTHIRDS	INTAKE/INTERVIEW	2- 3-82
SHELBA VINCELL	INTAKE/INTERVIEW	2- 3-82
SOL GOTHARD	LEGAL ASPECTS	2- 3-82
FRANK HARRIGAN	LEGAL ASPECTS	2- 3-82
VINCENT DE FRANCIS	LEGAL ASPECTS	2- 3-82
ROBERT BUCHICCHIO	CASEWORK	3- 7-82
BETH BRIDGMAN	CASEWORK	3- 7-82
JIM CODEGA	CASEWORK	3- 7-82

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WORKER WAVE III - WINTER 1982

TRAINER	SESSION	DATE
CHRIS MOUZAKITIS	DYNAMICS	1-21-82
TIMOTHEA LEWIS	DYNAMICS	1-21-82
DES RUNYAN	MEDICAL ASPECTS	1-21-82
SANDRA K. FELT	CHILD DEVELOPMENT/PARENTING	1-21-82
MARY FRANEK	CHILD DEVELOPMENT/PARENTING	1-21-82
DIANE ERNE'	INTAKE/INTERVIEW	2-15-82
TIMOTHEA LEWIS	INTAKE/INTERVIEW	2-15-82
THELMA BAILY	INTAKE/INTERVIEW	2-15-82
VINCENT DE FRANCIS	LEGAL ASPECTS	2-19-82
SOL GOTHARD	LEGAL ASPECTS	2-19-82
GERRY BLANCHARD	CASEWORK	3-26-82
DIANE ERNE'	CASEWORK	3-26-82
MIKE COREY	CASEWORK	3-26-82

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WORKER WAVE IV - SPRING 1982

TRAINER	SESSION	DATE
AMY SCHOENENBERGER	DYNAMICS	4-20-82
DES RUNYAN	MEDICAL ASPECTS	4-21-82
JOAN SOLHEIM	CHILD DEVELOPMENT/PARENTING	4-21-82
SANDRA K. FELT	CHILD DEVELOPMENT/PARENTING	4-22-82
SHELBA VINCELL	INTAKE/INTERVIEW	5-19-82
KATHY WOOTEN	INTAKE/INTERVIEW	5-19-82
CHRIS MOUZAKITIS	INTAKE/INTERVIEW	5-19-82
FRANK HARRIGAN	LEGAL ASPECTS	5-20-82
SOL GOTHARD	LEGAL ASPECTS	5-20-82
DON CORBETT	LEGAL ASPECTS	5-21-82
MIKE COREY	CASEWORK	6-14-82
ROBERT BUCHICCHI	CASEWORK	6-14-82
GERRY BLANCHARD	CASEWORK	6-18-82

AMERICAN HUMANE FACULTY SCHEDULE

ALBERTA WORKER WAVE V - FALL 1982

TRAINER	SESSION	DATE
SHIRLEY FITZ-RITSON	DYNAMICS	9-28-82
DES RUNYAN	MEDICAL ASPECTS	9-29-82
SANDRA K. FELT	CHILD DEVELOPMENT/PARENTING	10- 1-81
JOAN SOLHEIM	CHILD DEVELOPMENT/PARENTING	10- 1-82
TOM CRUTHIRDS	INTAKE/INTERVIEW	11- 3-82
SHELBA VINCELL	INTAKE/INTERVIEW	11- 3-82
KATHY WOOTEN	INTAKE/INTERVIEW	11- 3-82
SOL GOTHARD	LEGAL ASPECTS	11-29-82
GERRY BLANCHARD	CASEWORK	12- 3-82
TERRY SMITH	CASEWORK	12- 3-82
BETH BRIDGMAN	CASEWORK	12- 3-82

CO-TRAINING SCHEDULE

ALBERTA WORKER WAVE VI - WINTER 1982

TRAINER	SESSION	DATE
RUTH LEWIS/AMY SCHOENENBERGER	DYNAMICS	11-16-82
BOB JOHNSON/JIM CODEGA	DYNAMICS	11-16-82
KENNETH MILLER	MEDICAL ASPECTS	11-16-82
PAT BICKERSTETH/JOAN SOLHEIM	CHILD DEVELOPMENT/PARENTING	11-18-82
MARILYN TRUDGEON/SANDRA FELT	CHILD DEVELOPMENT/PARENTING	11-18-82
BOB CRADDOCK/TIMOTHEA LEWIS	INTAKE/INTERVIEW	12-13-82
JOYCE HANLEY/TOM CRUTHIRDS	INTAKE/INTERVIEW	12-13-82
JULIA TURNBULL	LEGAL ASPECTS	12-17-82
LOUISE GAUNCE/MIKE COREY	CASEWORK	1-24-83
DENNIS SWITZER/BOB BUCHICCIO	CASEWORK	1-24-83

ALBERTA FACULTY SCHEDULE

WORKER WAVE VII - WINTER 1983

TRAINER	SESSION	DATE
RUTH LEWIS	DYNAMICS	1-11-83
JACK BRUMMITT	MEDICAL ASPECTS	1-11-83
MARILYN TRUDGEON	CHILD DEVELOPMENT/PARENTING	1-13-83
PAT BICKERSTETH	CHILD DEVELOPMENT/PARENTING	1-13-83
BOB CRADDOCK	INTAKE/INTERVIEW	2-14-83
JOYCE HANLEY	INTAKE/INTERVIEW	2-14-83
JULIA TURNBULL	LEGAL ASPECTS	2-17-83
LOUISE GAUNCE	CASEWORK	3-14-83
DENNIS SWITZER	CASEWORK	3-14-83

APPENDIX B:

LIST OF PARTICIPATING
AMERICAN HUMANE FACULTY
IN COMPREHENSIVE CHILD PROTECTIVE SERVICES TRAINING

ALBERTA, CANADA

PARTICIPATING AMERICAN HUMANE FACULTY
ALBERTA COMPREHENSIVE TRAINING PROJECT

Donna Jared Austin, ACSW
Clinical Therapist and Psychiatric Social Worker
Atlanta, Georgia

Thelma Falk Baily, MSS
Associate Director
New England Resource Center for Protective Services
Boston, Massachusetts

Gerald Blanchard
Social Work Counselor and Consultant
Winona Marriage and Family Counseling Center
Winona, Minnesota

Beth Bridgman, MSW
Clinical Social Work Consultant
Topeka, Kansas

Larry Brown, ACSW
Deputy Executive Director,
The American Humane Association
Denver, Colorado

Robert J. Buchichio, ACSW
Clinical Social Worker
Montpelier, Vermont

James J. Codega, ACSW
Attleboro Mental Health Center
Attleboro, Massachusetts

Donald J. Corbett, Jr., J.D.
Judge of Family Court
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School of Social Work
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Theresa Flynn Smith, MSW
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Educational and Child Protection Team Coordinator
C. Henry Kempe Center
Denver, Colorado

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Children, Youth and Family Consultant
West Virginia Department of Welfare
Morefield, West Virginia

Kathleen Wooten, ACSW
Program Director
Department of Human Resources
Waco, Texas

Alexander G. Zaphiris, MSW, JD, Ed.D.
Professor and Associate Dean Graduate School of Social Work,
University of Houston
Houston, Texas

Vincent DeFrancis, J.D.
Director Emeritus,
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Sun City, Arizona

Diane Erne'
Director, Alliance Child Abuse Coordination Program
Onondaga County, New York

Sandra Kay Felt, MSW
Director, Project Respite and Remediation
Colorado Springs, Colorado

Shirley Fitz-Ritson, Ph.D.
Director, Child Protective Services Division
Columbia, South Carolina

Mary Franek
Regional Training Coordinator for Social Workers
and Parent Educators
Mt. Zion, West Virginia

Sol Gothard, MSW, J.D.
Judge, Jefferson Parish Juvenile Court
Gretna, Louisiana

C. Frank Harrigan, J.D.
Attorney at Law
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Kathleen Hayes, Ph.D.
Quality of Practice Coordinator
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Wayne Holder, ACSW
Director, Children's Division
The American Humane Association
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Director, Ambulatory Services
Children's Hospital
Oakland, California

Timothea Lewis
Child Protective Services Consultant
Department of Social Services
Columbia, South Carolina

APPENDIX C:

BACKGROUND INSTRUMENT

AMERICAN HUMANE

Background Questionnaire
for
Training in Child Protection

1. IDENTIFICATION:

NAME: _____

AGENCY _____ AGENCY PHONE (__) _____

CURRENT POSITION: WORKER ☐ SUPERVISOR ☐ OTHER ☐

AGE: _____ years SEX: Male ☐ Female ☐

2. EXPERIENCE

(a) Length of time in current position: ___years __ months
(b) Length of time in child protection services: ___years __ months
(c) Length of time in social work: ___years __ months
(d) If appropriate, length of time as child protection supervisor: ___years __ months
(e) If appropriate, length of time as other supervisor: ___years __ months

3. EDUCATION (indicate highest degree obtained)

☐ (a) High school diploma

☐ (b) Community College diploma:

(c) University degree:

☐ Partially Completed

☐ BSW

☐ Social Sciences Major

☐ Other Major

(d) Graduate degree:

☐ Partially completed

☐ MSW

☐ Other Masters

☐ DSW

☐ Other advanced degree (specify: _____)

4. Caseload (Complete only appropriate responses)

Workers:	Total number of families	____
	Number of CPS families	____
Supervisors:	Total number of workers supervised	____
	Number of CPS workers supervised	____

5. CPS TRAINING

(a) Have you had any formal, specialized training in CPS within the past two (2) years?

Yes ☐ No ☐

(b) If "yes", approximately how many hours? ___

(c) Date of most recent training: ____

APPENDIX D:

WORKER PERFORMANCE ASSESSMENT INSTRUMENT

CHILD PROTECTIVE SERVICES

WORKER PERFORMANCE ASSESSMENT PACKAGE

WORKER _____

SUPERVISOR _____

OFFICE LOCATION _____

PRE_____ POST_____

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Rev. 1-82

CLIENT DYNAMICS (1)

A. Standards:

1. General content knowledge of client dynamics
2. Other content on client dynamics for which the worker is accountable
3. Cases the worker carries

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function.
2. Unfamiliar with worker's performance.
3. New worker.
4. Unfamiliar with this function.
5. Other, specify _____

_____

MEDICAL ASPECTS OF CHILD PROTECTION (2)

A. **Standards:**

1. General content knowledge of the medical aspects of child protection
2. Other content on medical aspects for which the worker is accountable
3. Reports, accepted reports, ongoing cases

B. **Assessment:** refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. **Justification:**

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

PARENTING AND CHILD DEVELOPMENT (3)

A. Standards:

1. General content knowledge of parenting and child development
2. Other parenting/child development content for which the worker is accountable
3. Cases in which child development or parenting are primary issues

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function.
2. Unfamiliar with worker's performance.
3. New worker.
4. Unfamiliar with this function.
5. Other, specify _____

_____

INTAKE AND INTERVIEWING (4)

A. Standards:

1. General Content knowledge of Intake and Interviewing
2. The following intake process functions:

Tasks

a. Receives report
b. Possibly makes collateral contacts - check records
c. Explores appropriateness of referral
d. Decides to commit agency to accept referral
e. Refers elsewhere, if necessary
f. Assesses need for service to reporter

3. Various types of reports of child abuse and neglect
4. State statutes and policies

B. Assessment: refer to rating definitions and instructions

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function.
2. Unfamiliar with worker's performance.
3. New worker.
4. Unfamiliar with this function.
5. Other, specify _____

INITIAL CONTACT AND INTERVIEWING (5)
(e.g. investigation)

A. Standards:

1. General content knowledge of initial contact and interviewing
2. The following process functions:

Tasks

a. Has initial contact with family/child
b. Makes subsequent assessment visits
c. Assesses damage to child
d. Assesses continued risk to child
e. Evaluates family indicators of child abuse/neglect (CA/N)
f. Determines if abuse or neglect exists and continues case as open
g. Determines need to invoke authority of Juvenile Court
h. Provides emergency services as needed
i. Provides feedback information to appropriate persons
j. Documents record

3. Various types of reports of CA/N which are accepted
4. State law and policy

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function.
2. Unfamiliar with worker's performance.
3. New worker.
4. Unfamiliar with this function.
5. Other, specify _____

LEGAL ASPECTS OF CHILD PROTECTION (6)

A. Standards:

1. General content knowledge of the legal aspects of child protection
2. State law
3. Reports, accepted reports and ongoing cases

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function.
2. Unfamiliar with worker's performance.
3. New worker.
4. Unfamiliar with this function.
5. Other, specify _____

_____

CLIENT ASSESSMENT (7)

A. Standards:

1. General content knowledge of client assessment
2. The following process functions:
   a. Studies family problems
   b. Individualizes family members
   c. Assesses strengths and areas for improvement
   d. Determines resources available and needed to family
   e. Examines treatment potential
   f. Specifies assessment conclusions
3. Ongoing cases

B. Assessment: refer to rating definitions and instructions:

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justifications:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

CASE PLANNING (8)

A. Standards:

1. General content knowledge of case planning
2. The following process functions:
   a. Involves client
   b. Specifies what changes need to occur to assure child's continued safety (worker/client point of view) Goals
   c. Decides potential for goal attainment and when
   d. Decides what services will be given to whom, by whom, how often and for how long
   e. Establishes review dates - documents plan
3. Ongoing cases

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

TREATMENT AND INTERVIEWING (9)

A. Standards:

1. Knowledge of content on treatment and interviewing
2. The following process functions:
   a. Advises client of plan so plan is understood
   b. Arranges for non-direct services and coordinate
   c. Provides direct services
   d. Documents progress of all services
3. Ongoing cases

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

CASE REVIEW (10)

A. Standards:

1. Knowledge of content on case review
2. The following process functions:
   a. Involves client
   b. Evaluates progress
   c. Updates assessment
   d. Continues plan, revises plan or closes case
   e. Communicates conclusions
3. Ongoing cases

B. Assessment: refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. Justification:

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

_____

CASE CLOSURE (11)

A. **Standards:**

1. Knowledge of content on case closure
2. The following process functions:
   a. Evaluates goal attainment
   b. Analyzes potential for remaining stable
   c. Examines need for referral to other services
   d. Documents closure with rationale
   e. Advises and prepares client for closure
   f. Advises other agencies or involved persons
3. Ongoing cases

B. **Assessment:** refer to rating definitions and instructions.

level	%	KNOWLEDGE (A)		APPLICATION (B)	
5	100%				
4	75%				
3	50%				
2	25%				
1	0%				

C. **Justification:**

D. If you cannot assess this item, circle as appropriate:

1. Worker does not perform function
2. Unfamiliar with worker's performance
3. New worker
4. Unfamiliar with this function
5. Other, specify _____

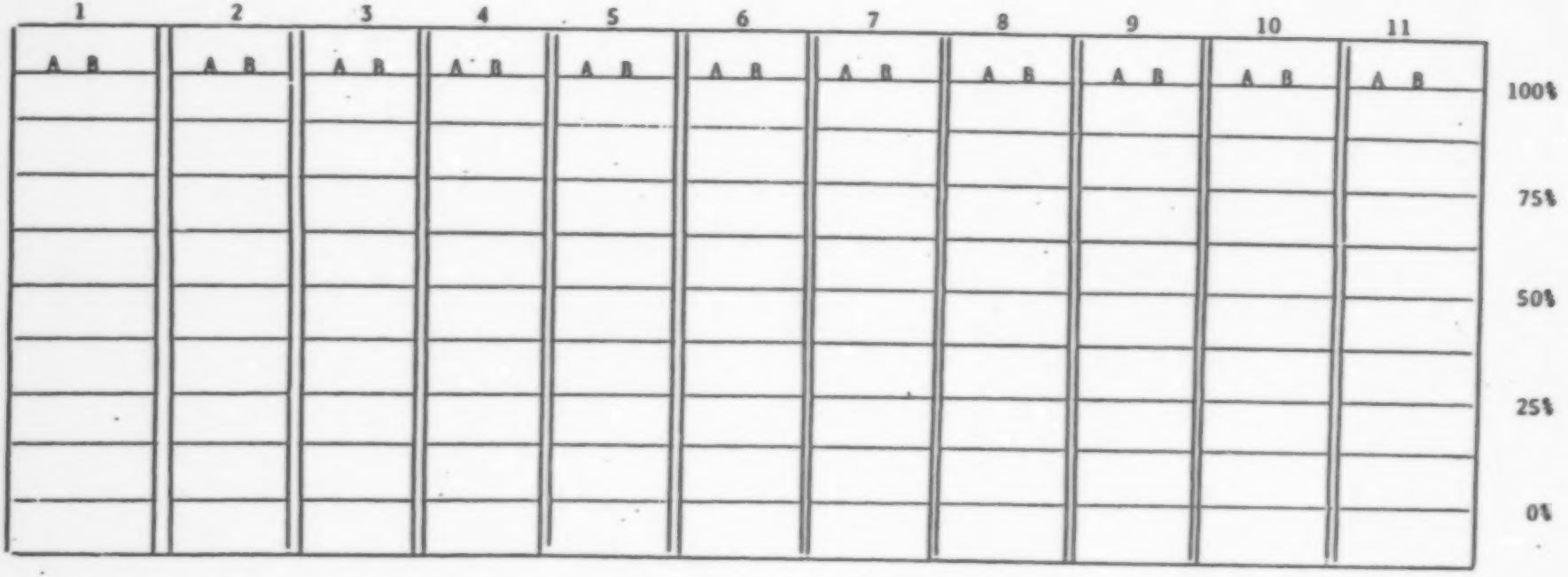
_____

How long have you supervised this worker? ____ months How long has worker been in the agency? ____ months

A. Assessment Areas:

1	2	3	4	5	6	7	8	9	10	11
Client Dynamics	Medical Aspects of CPS	Child Develop. and Parent-ing	Intake and Inter-viewing	Initial Contact and Inter-viewing	Legal Aspects of CPS	Client Assess-ment	Case Planning	Treatment and Inter-viewing	Case Review	Case Closure

B. Assessment Ratings:



Plot Knowledge (A) with x---------x
Plot Application (B) with o---------o

OVERALL PERFORMANCE ASSESSMENT

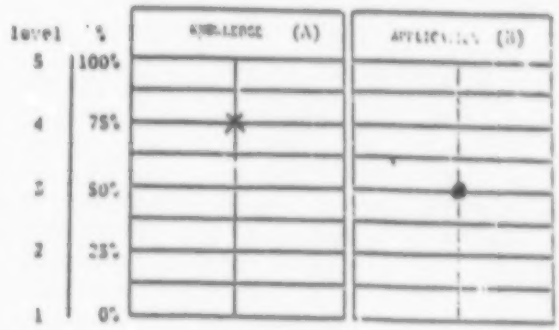
HOW TO USE THE GRAPHS:

Example (1): Individual Assessment Areas.

CLIENT DYNAMICS

Knowledge (A) = Level 4 (75%)

Application (B) = Level 3 (50%)



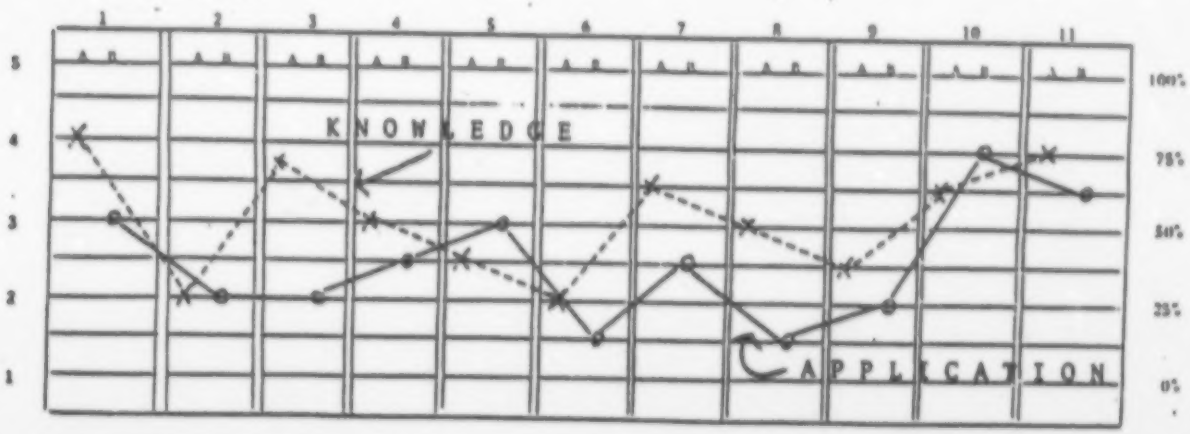
In the above graph, a worker's performance in the area of "Client Dynamics" is plotted for how knowledgeable (A) the worker was judged to be and how adequately that worker was found to apply (B) that knowledge in practice. The supervisor's judgment, for this example, is that the worker knows the content of client dynamics at Level 4 (or 75% of mastery) but is able to apply that knowledge in practice at only a Level 3 (or 50% of the time). The A and B ratings for "Client Dynamics" for this worker would next be plotted on the overall assessment graph, seen below.

How long have you supervised this worker?____months How long has worker been in the agency? ____months

A. Assessment Areas:

1	2	3	4	5	6	7	8	9	10	11
Client Dynamics	Medical Aspects of CPS	Child Develop. and Parenting	Intake and Interviewing	Initial Contact and Interviewing	Legal Aspects of CPS	Client Assessment	Case Planning	Treatment and Interviewing	Case Review	Case Closure

B. Assessment Ratings:



Plot Knowledge (A) with x----------x

Plot Application (B) with o———o

OVERALL PERFORMANCE ASSESSMENT

On the Overall Performance Assessment graph, the Knowledge (A) and Application (B) ratings for Client Dynamics (Assessment Area 1) are indicated at Level 4 and Level 3, respectively. Ratings for all succeeding assessment areas would be plotted similarly. The completed graph demonstrates differences, if any, between each worker's level of knowledge and ability to apply that knowledge in practice across all assessment areas.

C. Justification. Supervisors are to provide a statement which is conclusive and justifies the assessment rating in B. The statement should adequately cover both knowledge and application ratings. Special justification is necessary for high or low ratings.

D. You may find that you are unable to accurately assess the worker in a particular area. When this is the case, simply circle or state the reason.

Upon completion of each worker assessment package, please route it to The American Humane Association.

You should keep a copy for yourself. The worker should have a copy. It is crucial that you complete this assessment based on the worker's performance before training begins and, again, after all training and the practicum are complete.

Mail to:

Kathleen Hayes, Ph.D.
American Humane Association
9725 East Hampden
Denver, Colorado 80231

APPENDIX E:

PRACTICUM AND PRACTICUM EVALUATION INSTRUMENTS

AMERICAN HUMANE

CHILD PROTECTIVE SERVICES TRAINING PRACTICUM

Purpose of the Training Practicum

The practicum component of the child protective services training program is designed to provide a continuing learning experience through the application of the knowledge gained in the core curriculum to real CPS cases. The practicum consists of a concentrated three week learning experience immediately following each week of the core curriculum training.

During the practicum, supervisors and workers will jointly select one aspect of the previous week's core curriculum training as an area for applied learning. The attached forms are designed to serve as guides for structuring the learning experience. Although teaching from an active case or cases is preferable, any medium or resource agreed upon by the supervisor and worker may be employed (e.g., video tape and role play). Be sure to state the rationale for your choice of method.

Through the practicum experience it is expected that your competence in practice will be reinforced and expanded and that the practicum will encourage you to use planned and thoughtful casework or supervision methods.

Instructions

On the first work day after the first week of training the worker and the supervisor should meet to decide the area(s) upon which the practicum should focus. This same process should recur immediately following each additional week of core curriculum training.

The identified learning area of the practicum can be as broad or specific as the worker and supervisor wish. For instance, the worker and supervisor may agree to concentrate on a broad area -- such as all aspects of the intake (case acceptance) function of child protection.

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Such a practicum would take into account who the client is as well as the types and purposes of questions asked and appropriate interviewing styles. Or the worker may desire a more specific or focused practicum experience and choose to concentrate, for example, on using a specific listening technique. Keep in mind that the practicum objectives should be realistic and clearly stated and understood by both worker and supervisor. If learning areas are too specific or limited, the worker may not make the maximum use of the practicum as an opportunity to improve practice. If, on the other hand, areas are too broad, they may be too difficult for the worker to handle in the time allotted and may lead to worker failure and frustration and a poor practicum experience for both worker and supervisor.

Regardless of the identified learning area(s) chosen, the following rules should be followed:

1. The practicum experience should be growth related. Concentrate on areas of deficiency or areas in which the worker has less competence.

2. The practicum design must be agreed upon by both the worker and his/her supervisor.

3. The practicum design must include a specific plan with stated methods for implementing learning objectives.

4. Each 3 week practicum experience must be based only on the content covered in the week of core curriculum training immediately preceding it.

The American Humane Association believes that by approaching the practicum as described you will be able not only to improve your knowledge of CPS but will also have the opportunity to learn how to better apply that knowledge so that you are more effective with the people you serve. In addition, you will have completed a supervisor-supervisee experience which can be continued and applied to new learning areas.

AMERICAN HUMANE

PRACTICUM FOR CHILD PROTECTIVE SERVICES

Worker_____

Supervisor _____

Office Location _____

Training Wave or Group:_____

Practicum Week (check one) 1__ 2__ 3__

Specific Instructions:

A. Learning Areas State in specific terms the agreed upon learning areas to be the center of attention for this practicum. Under comments provide the rationale for choice of these areas. Remember 3 weeks is too brief a period to have many unrelated learning areas. Concentration is recommended.

B. Outcome Objectives List the specific objectives of this practicum related to learning areas. Make sure objectives are measureable and specific. Example: "At the conclusion of this practicum the worker will understand and be able to selectively and spontaneously demonstrate 3 listening techniques which encourage the client to continue talking." Please List All Applicable Objectives (More than one objective may be stated for a learning area.)

C. Teaching Plan Provide a complete description of the plan for meeting the objectives. State and describe the methods for teaching. State activities and purposes of activities. State what arrangements will exist for feedback. Indicate how the core curriculum will be used as a resource. Establish a time frame for the plan. If a case is used in the learning process, provide a brief summary of the nature of the case. Be sure and include methods of supervision to be used and rationale for same.

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D. Description of Process At the conclusion of each 3 week practicum describe in some detail how implementation occurred. Were there barriers? Were there adjustments? Was the plan carried out as originally designed? Essentially, provide a narrative of the application of the teaching plan.

E. Results/Conclusions State the outcome for each objective. Be specific. Draw judgments about accomplishments. Indicate appropriateness of objectives and plan. This should be a joint effort between the worker and the supervisor.

PRACTICUM PLAN AND RESULTS

A. AGREED UPON LEARNING AREAS

1. _____

2. _____

3. _____

4. _____

5. _____

B. OBJECTIVES

1. _____

2. _____

3. _____

4. _____

5. _____

C. TEACHING PLAN

D. DESCRIPTION OF PROCESS

E. RESULTS/CONCLUSIONS

1. _____

2. _____

3. _____

4. _____

5. _____

PRACTICUM EVALUATION

Worker _____ [ ] (Check your own Position)

Supervisor _____ [ ]

Office Location _____

Both the supervisor and the worker are to complete a practicum evaluation form following the two practicum experiences. By rating your experience on the scales, you are indicating how much you agree with each statement which is made about the practicum. (1 = totally disagree, 5 = totally agree).

NOTE: The results of your evaluation of the practicum experience will be confidential, and all evaluations will be held and reviewed only by American Humane staff.

It is important that both the worker and supervisor complete this form after all weeks of training and all practicums. These forms should be returned to American Humane following completion of the final practicum.

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Practicum Evaluation

1. During the practicum creative methods for learning were used.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

2. I feel I was committed to the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

3. I feel my (supervisor, worker - circle one) was committed to the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

4. I was motivated to participate in the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

5. My (supervisor, worker - circle one) was motivated to participate in the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

6. The core curriculum content was applied in the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

7. The purpose of the practicum was clear.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

8. The design of the practicum was clear.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

9. I was involved in the design of the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

10. My (supervisor, worker - circle one) was involved in the design of the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

11. My (supervisor, worker - circle one) and I were in agreement about the design of the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

12. The practicum was useful.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

13. There were unpreventable barriers to successfully implementing the design.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

14. There were preventable barriers to successfully implementing the practicum.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

15. The practicum was conducted in a supportive climate.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

16. I found the practicum personally intimidating.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

17. This practicum would be useful as a continuing supervisory tool.

Totally Disagree — Totally Agree

1----------2----------3----------4----------5

18. List helpful aspects of the practicum.

a.

b.

c.

d.

e.

19. Identify ways to improve the practicum.

a.

b.

c.

d.

e.

APPENDIX F:

EMPLOYEE SURVEY INSTRUMENTS

AMERICAN HUMANE

SPRING, 1981

PERCEPTION SURVEY FOR CHILD PROTECTION
Form A

The following statements relate to various aspects of child protection services. Please indicate your opinion about the extent to which you agree or disagree with a statement by circling the appropriate number.

It is realized that judgments for some statements are difficult and you are asked to respond according to how you believe or feel most of the time. Do not "read" other information into the statement. Also, it is extremely important that you do not leave any item blank.

Your time on responding to this survey is limited to 10 minutes.

Opinion		
Agree Disagree		
1 2 3 4 5	1.	I believe that the central focus of CPS is determing if the child can safely remain in the home.
1 2 3 4 5	2.	I feel that cultural differences pose a barrier to working with minority clients.
1 2 3 4 5	3.	I feel that the CPS worker's legal authority is the most effective tools he or she has.
1 2 3 4 5	4.	I believe that a CPS worker's responsibility for clients carries over into his or her own time.
1 2 3 4 5	5.	I feel that CPS workers are obligated to involve their supervisors in decision-making.
1 2 3 4 5	6.	I believe that, in general, parents who abuse or neglect their child know that what they are doing is wrong.
1 2 3 4 5	7.	I feel that it is important to anticipate hostility from clients at initial contact.
1 2 3 4 5	8.	I feel that temporarily placing the child away from the home can help many families in the long run.
1 2 3 4 5	9.	I believe that the CPS worker is responsible for educating those that make the report in terms of the agency's role.

Opinion

Agree Disagree Form A

1 2 3 4 5	10.	I believe that most abused or neglected children are loved by their parents.
1 2 3 4 5	11.	I believe that, as a rule, CPS workers should not try to do counseling with clients who have emotional problems.
1 2 3 4 5	12.	I feel that the CPS worker should share what he or she knows about the client with the client.
1 2 3 4 5	13.	I believe that CPS clients can't be approached systematically because they are more dissimilar than similar to each other.
1 2 3 4 5	14.	I believe that at present it is more important to use what is already known about child abuse and neglect than to do more research.
1 2 3 4 5	15.	I feel that if parents understood why they abuse their child, they could prevent themselves from doing it again.
1 2 3 4 5	16.	I believe that neglect is often caused by not having enough money to take care of the children.
1 2 3 4 5	17.	I believe that a worker can still be effective if he or she at least recognizes his/her negative feelings about a client.

PERCEPTION SURVEY FOR CHILD PROTECTION
Form B

The following statements relate to various aspects of child protection services. Please indicate your opinion about the extent to which you agree or disagree with a statement by circling the appropriate number.

It is realized that judgments for some statements are difficult and you are asked to respond according to how you believe or feel most of the time. Do not "read" other information into the statement. Also, it is extremely important that you do not leave any item blank.

Your time on responding to this survey is limited to 10 minutes.

Opinion		
Agree Disagree		
1 2 3 4 5	1.	I believe that, as a rule, clients with emotional problems should be referred out to mental health services.
1 2 3 4 5	2.	I feel that abusive parents could avoid hitting their child if they knew why they do it.
1 2 3 4 5	3.	I believe that lack of adequate financial resources is at the root of most neglect.
1 2 3 4 5	4.	I feel that if a CPS worker is at least aware of negative feelings about a client, he or she can still be effective.
1 2 3 4 5	5.	I feel that clients should be able to know what workers know about them.
1 2 3 4 5	6.	I believe that the best resources a CPS worker has is his or her legal authority.
1 2 3 4 5	7.	I feel that a CPS worker should be available to clients even after work hours.
1 2 3 4 5	8.	I believe that workers have an obligation to work closely with their supervisors when making decisions.

Opinion

Agree Disagree Form B

1 2 3 4 5	9.	I feel that, as a rule, maltreating parents know that their treatment of the child is considered to be unacceptable behavior.
1 2 3 4 5	10.	I feel it is best to be prepared to encounter hostility when first visiting a client.
1 2 3 4 5	11.	I believe that determining if it is safe for the child to remain in the home is the main focus of CPS.
1 2 3 4 5	12.	I feel that working with minority clients is made more difficult because of cultural differences.
1 2 3 4 5	13.	I feel that many clients are benefitted in the long run when their child is temporarily removed from them.
1 2 3 4 5	14.	I believe that it is the CPS worker's responsibility to explain the agency's role to people who report maltreatment.
1 2 3 4 5	15.	I believe that most CPS clients are unique and cannot be approached systematically.
1 2 3 4 5	16.	Rather than doing more research, I believe the present priority is to apply what we already know about child maltreatment.
1 2 3 4 5	17.	I feel that most abusive and neglectful parents love their children.

November, 1981 to December, 1982

AMERICAN HUMANE

CHILD PROTECTIVE SERVICES

PROFESSIONAL STANDARDS SURVEY

INSTRUCTIONS: The following statements are based on American Humane's professional standards for the field of child protection. Please indicate, by circling the appropriate number, how accurately you feel or believe each statement to be with respect to your personal experience in your agency.

		DISAGREE				AGREE
1.	In my agency, administrators and policymakers are committed to providing child protective services as a unique, specialized social service.	1	2	3	4	5
2.	In my agency, administrators and policymakers identify with the helping, non-judgmental, non-punitive philosophy of child protective services.	1	2	3	4	5
3.	Workers with whom I come in contact identify with the helping, non-judgmental, non-punitive philosophy of child protective services.	1	2	3	4	5
4.	In my agency, administrators and policymakers support professional decisions related to child protective cases.	1	2	3	4	5
5.	In my agency, child protective services are available to clients 24 hours a day, every day.	1	2	3	4	5
6.	Because of the emergency, high-risk nature of protective services in my agency, the size of case-loads is carefully controlled.	1	2	3	4	5
7.	In my local community, resources are available to augment the protective services function.	1	2	3	4	5
8.	The supervisors with whom I come in contact, support, train, assist and share responsibility with workers.	1	2	3	4	5
9.	The supervisors with whom I come in contact, are experienced and provide high quality supervision.	1	2	3	4	5

		DISAGREE				AGREE
10.	In my experience, the agency carefully selects workers who exhibit appropriate helping, humanistic attitudes and skills.	1	2	3	4	5
11.	Child protection workers are trained rigorously in my agency.	1	2	3	4	5
12.	My agency maintains a continuing program of community relations aimed at interpreting child protective services to the community.	1	2	3	4	5
13.	Staff scheduling by my agency takes into account that child protective services require a high number of after office hour interviews.	1	2	3	4	5
14.	In my agency, my responsibilities as a child protective worker are carefully delineated.	1	2	3	4	5
15.	Child protection in my agency represents a service provided to the community by responding with appropriate feedback to the person making a report of child maltreatment.	1	2	3	4	5

APPENDIX G:

SUPERVISORY SELF-ASSESSMENT INSTRUMENT

AMERICAN HUMANE

SUPERVISORY SELF ASSESSMENT

PRE_____ POST_____

1. I spend this % of time in the following:

   Administration _____

   Teaching _____

   Case Consultation _____

   Worker Evaluation _____

   Personnel Support _____

   Other (Specify) _____

2. Number of unit meetings I attend:

   One per week _____

   Two per month _____

   One per month _____

   None _____

   As required _____

3. The purpose of my unit meetings is: _____

_____

_____

_____

_____

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4. I hold individual conferences with workers:

One hour per week _____

One hour every two weeks _____

One hour per month _____

More than one hour per week _____

Never _____

As needed by the worker _____

Other (specify) _____

5. List the purposes of your individual conferences.

6. In what other ways do you interact with your supervisees?

7. State which supervisory method(s) you employ and why you employ them.

8. State <u>your personal</u> perception of what your major areas of responsibility should be.

9. List the barriers to your effectiveness as a supervisor.

a.

b.

c.

d.

e.

f.

g.

10. How satisfied are you with your role as a supervisor?

11. How do you rate your effectiveness?

Poor Fair Average Good Excellent

1----------2----------3----------4----------5

COMMENTS:

APPENDIX H:

EMPLOYEES' SESSION EVALUATION INSTRUMENTS

SPRING, 1981

SESSION: _____

AMERICAN HUMANE

TRAINING EVALUATION

A. Please circle the number which best reflects your level of agreement or disagreement with each of the following statements. Each circled number should best reflect your opinion or feelings about the training.

	Disagreement			Agreement		
	Strong	Moderate	Slight	Slight	Moderate	Strong
1. The content was covered thoroughly.	1	2	3	4	5	6
2. The content was interesting and challenging.	1	2	3	4	5	6
3. The content was relevant and practical.	1	2	3	4	5	6
4. The objectives were clearly stated and consistent with content.	1	2	3	4	5	6
5. The objectives were fully met.	1	2	3	4	5	6
6. The teaching methods enhanced learning.	1	2	3	4	5	6
7. The facilities enhanced learning.	1	2	3	4	5	6
8. The trainer was enthusiastic.	1	2	3	4	5	6
9. The trainer was organized and well-prepared.	1	2	3	4	5	6
10. The trainer was knowledgeable.	1	2	3	4	5	6
11. The trainer was sensitive to the needs of the group.	1	2	3	4	5	6

B. My overall rating of the session is (circle one):

EXCELLENT GOOD ADEQUATE POOR USELESS

C. Compared to other training I have received before, the quality of this training is (circle one):

BEST BETTER THE SAME WORSE WORST

D. List the topics covered in this session that you found:

MOST USEFUL: _____

_____

_____

LEAST USEFUL: _____

_____

_____

E. List the objectives of the session as you understood them:

_____

_____

_____

F. List the teaching methods or processes that you found:

MOST EFFECTIVE: _____

_____

_____

LEAST EFFECTIVE: _____

_____

_____

G. To make the next session better, I recommend that:

_____

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H. Other comments:

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TRAINING EVALUATION

AMERICAN HUMANE

Name of Trainer: _____

Title of Session: _____ Date: _____

A. Please circle the number which best reflects your assessment of the following statements. Each circled number should best reflect your opinion or feelings about this training session.

	Poor			Average			Good		
	Low	Mid	High	Low	Mid	High	Low	Mid	High
1. Coverage of material.	1	2	3	4	5	6	7	8	9
2. Interest and challenge of content.	1	2	3	4	5	6	7	8	9
3. Relevance and practicality of content.	1	2	3	4	5	6	7	8	9
4. Objectives stated and consistent with content.	1	2	3	4	5	6	7	8	9
5. Achievement of objectives.	1	2	3	4	5	6	7	8	9
6. Organization and preparation of trainer.	1	2	3	4	5	6	7	8	9
7. Trainer's knowledge.	1	2	3	4	5	6	7	8	9
8. Trainer's enthusiasm.	1	2	3	4	5	6	7	8	9
9. Trainer's sensitivity to needs of group.	1	2	3	4	5	6	7	8	9
10. Degree to which teaching methods enhanced learning.	1	2	3	4	5	6	7	8	9

B. Please circle the word which best reflects your opinion:

1. Overall, I would rate this session as: Excellent Good Adequate Poor

2. In enhancing learning, the facilities were: Excellent Good Adequate Poor

C. List the topics covered in this session that you found:

MOST USEFUL: _____

_____

_____

LEAST USEFUL: _____

_____

_____

D. List the objectives of the session as you understood them.

_____

_____

_____

E. To make the next session better, I recommend that:

_____

_____

_____

F. Comments:

_____

_____

APPENDIX I:

PRE AND POST-TEST CORRESPONDENCE
WITH ALBERTA DSSCH EMPLOYEES

MEMORANDUM

CHILD PROTECTION STAFF

AMERICAN HUMANE

To: Alberta Participants in American Humane's Comprehensive Training For Child Protection Services

From: Kathleen Hayes, Training Evaluation Coordinator

Subject: Training Evaluation Instruments and Their Confidentiality

We, at American Humane, are looking forward to our involvement with you in the upcoming training in Alberta. As part of our training effort we will be conducting two tests based on the content to be covered in training. One of these tests will be conducted before the core training and another after the training. In addition, following each week of training, you will be involved in applying the training content in a practicum guided by your supervisor. Both workers and supervisors will be asked to evaluate the practicum experience.

We want to stress that the examinations and assessments represent an important part of the evaluation of this training project. The purpose of the evaluation is to determine the level of knowledge and practice represented by workers and supervisors in Alberta, both before and after this training project. The exams and assessments complement the training process which is designed to help you grow professionally. We want you to take advantage of the training to develop your knowledge and skill.

Any analyses and reports will be based on the combined scores of all who participate. The evaluation data will be controlled exclusively by The American Humane Association. The purpose of confidentiality is to assure individual protection and promote open and honest participation by all trainees. You may receive your own scores on the core exams if you request them.

Keep in mind that there are no passing or failing scores. You are not competing with anyone else. Therefore, we encourage you to approach this exam and the entire training experience with openness and enthusiasm. We look forward to working with you!

The American Humane Association — P. O. Box 1266 — Denver, Colorado 80201

MEMORANDUM

CHILD PROTECTION STAFF

AMERICAN HUMANE

TO: ALBERTA PARTICIPANTS IN AMERICAN HUMANE'S COMPREHENSIVE TRAINING FOR CHILD PROTECTION SERVICES

FROM: KATHLEEN HAYES, PH.D., TRAINING EVALUATION COORDINATOR
THE AMERICAN HUMANE ASSOCIATION

SUBJ: POSTTEST OF CORE TRAINING

The enclosed posttest package which you have been given represents the culmination of American Humane's comprehensive CPS training in which you have participated for several months. At this point, you should have completed the pretest, the three-week comprehensive CPS training course, and the three-week practicum with your supervisor. The present posttest and survey should serve to reinforce many of the concepts presented in the book, Helping in Child Protective Services, in your training sessions, in the various AHA handouts, and in the practicum. Results from the tests will help both American Humane and the Department to better understand your training needs and to evaluate the overall effectiveness of American Humane's comprehensive CPS training. Hopefully, areas where further training is required will be identified by this process.

We wish to again stress that the posttest and survey are designed to complement the training process and represent an important part of the evaluation. Your cooperation in helping to complete this evaluation, therefore, is greatly appreciated and represents a high level of professionalism on your part. As with the pretest, all individual scores will be controlled exclusively by The American Humane Association. It is hoped that this continued confidentiality will assure individual protection and promote your open and honest participation.

We, at American Humane, would like to express our sincere appreciation for your contribution to the training these past few months. The opportunity to meet you and work with you has been a tremendous experience for the staff and faculty of American Humane. We wish to congratulate you on completing the comprehensive training course and offer our hope that you will continue to work for a high level of professionalism in child protection. Good luck!

KH:jd

Encl.

The American Humane Association — P. O. Box 1266 — Denver, Colorado 80201

MEMORANDUM

CONTROL GROUP

AMERICAN HUMANE

February 23, 1982

TO: TEST PARTICIPANTS

FROM: KATHLEEN HAYES, EVALUATION COORDINATOR
THE AMERICAN HUMANE ASSOCIATION

SUBJ: TRAINING EVALUATION

On behalf of American Humane, I wish to convey our sincere appreciation for the time you are spending to help improve program accountability in DSSCH. As you may know, American Humane is involved with the Department in providing comprehensive training to Alberta's child protection workers. As part of this effort, there is an ongoing evaluation of this training at the individual worker level.

Your participation in taking this pretest and a later posttest will greatly enhance our ability to understand the effectiveness of the training we are providing, even though, presently, you may not be involved directly in child protection yourself. All of your individual results will be held strictly confidential by American Humane.

We thank you again for your time and cooperation.

KH:jd

The American Humane Association 5351 S Roslyn Street Englewood, Colorado 80111

MEMORANDUM

CONTROL GROUP

AMERICAN HUMANE

TO: ALBERTA TEST PARTICIPANTS

FROM: KATHLEEN HAYES, PH.D., EVALUATION COORDINATOR
THE AMERICAN HUMANE ASSOCIATION

SUBJECT: CHILD PROTECTION TRAINING EVALUATION

Once again, on behalf of American Humane, I wish to thank you for your participation in the DSSCH training evaluation for child protection.

Your results, along with those from child protection workers who have been through training, will provide a more complete picture as to the effectiveness of American Humane's training.

This posttest package is the final component you will be asked to complete. As with the pretest, all individual results will be held strictly confidential by American Humane.

Once again, may I express our appreciation for your time and cooperation.

KH:jd

The American Humane Association — P. O. Box 1266 — Denver, Colorado 80201

APPENDIX J:

CHILD PROTECTIVE SERVICES STANDARDS

CHILD PROTECTIVE SERVICES

STANDARDS

CHILD PROTECTION
THE AMERICAN HUMANE ASSOCIATION

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CHILD PROTECTIVE SERVICES DEVELOPMENT AND PHILOSOPHY

Today's child protection programs are based on the conviction that protection of children is primarily the responsibility of parents and when, for whatever reason, parents fail, and children are harmed, the state must intervene to correct the situation and protect the child.

Fundamental to child protection philosophy is the recognition that child abuse and neglect is rarely a willful act on the part of parents but that it represents for the most part parental failure, inadequacy and inability to care for children. This is not to say that there are not some cases which involve willful, intentional and deliberate attacks on children by their parents. It does mean that most parents want to be good parents, have capacity for adequate parenting and can be helped to be better parents even after abusing or neglecting their children.

Because children have a right to be with their own parents, the ultimate objective of child protective services is to protect children through stabilizing and strengthening families whenever possible through working with parents to help them do a better job. Each instance must be assessed to determine the potential for change and to evaluate the risk to the child. Child protection, thus, is a child centered, family focused service.

From its beginnings in the late 1800's until the early 1900's, the emphasis of child protection was on the rescue of children from "bad" homes, prosecution of parents, and the placement of "cruelly treated" children in institutions. Since then, many factors have influenced the development of

makes certain its program meets standards of professional practice and backs it up at all times.

2. Specialization - A Unique Service

Child protective services are best provided, where possible, by specialized workers who are selected and trained to develop and maintain the orientation, attitudes and skills of child protective services. They must be free to provide a very special brand of reaching-out casework. Many years of experience have taught that quality protective services cannot be achieved when workers deal with a broad variety of cases.

Child protective services are a specialized area of practice and differ from routine and basic approaches of social work in the following ways:

- Its reaching-out emphasis;
- Dealing with the resistive, unmotivated and sometimes hostile client;
- Its critical identification and assessment responsibilities;
- Its knowledge of law and skillful use of the court; and
- Its emergency nature.

3. Twenty-four Hour Coverage - Prompt Response and Immediate Assessment

A child protective agency must be geared to accept reports from any and all sources including the anonymous. Intake, assessment, and emergency services must be available at all times—twenty-four hours a day, every day. Child protection requires not only high professional standards, but availability at all times. It makes little sense to require a specialized, professional service and then turn the program over to other agencies during the night hours.

Child protection responsibility requires an immediate assessment of the risk or danger to the child. Where the risk is deemed to be high, immediate response must be initiated. When there is no immediate or apparent danger, services must be initiated at least within 48 hours of the report.

4. Caseload Control - A Matter of Effectiveness

Because of the emergency, high-risk nature of protective services and the intensity of treatment required, it is necessary to keep the size of caseloads under control to permit the CPS worker to give the time and service each case requires. Workers burdened by the weight of excessive caseloads with the insistent demands for attention are forced to substitute superficial service for the intensive casework inherent to sound child protective services.

The emergency nature of CPS, the risk of additional maltreatment to children, and the intensity of services required to stabilize and correct family problems justify caseloads far lower than in other areas of social service. Field experience has established an effective caseload for the CPS worker at 20 to 25 families. Failure to control caseloads results in poor service, high staff turnover, overuse of placement and dilution of the quality of service.

5. Multidisciplinary Input - A Teamwork Approach

While primary responsibility for investigation and exploration of the problem is placed with the protective service agency, interdisciplinary consultation must be available for input, guidance, special expertise and direction on selected cases.

Not every case requires this extra input. When required, a battery of consultants

modern child protective services leading to the creation of a helping, non-punitive intervention aimed at protecting children through assisting their parents whenever possible to resolve problems which underlie abuse and neglect.

One hundred years of experience has led to the development of standards for agencies which carry out CPS responsibility. The American Humane Association presents this summary of operational standards as the result of many requests received from participants of training workshops across the United States and in Canada. In the face of considerable concern regarding the quality and effectiveness of child protective services, it is our conviction that a direct relationship exists between program effectiveness and the ability to deal realistically with these standards of agency operations and administration.

THE EIGHT STEPS OF CHILD PROTECTIVE SERVICES

By legal mandate and agency policy, CPS is required to:

1. Respond promptly to reports of alleged neglect, abuse or exploitation of children to determine the validity of the report;
2. Assess the damage to children resulting from neglect or abuse;
3. Evaluate the risk of further injury to the children in the home and determine whether the children should remain in the home or whether emergency action is required.
4. Determine and identify the family problem or problems which contributed to or resulted in neglect or abuse;
5. Evaluate the potential for treatment of the underlying factors to correct conditions and rehabilitate the family;
6. Plan a course of treatment calculated to stabilize and rehabilitate the family through services of the protective agency and the use of other appropriate community resources to meet special needs of the children and parents;
7. Initiate the treatment plan and stimulate involvement of services from community resources to meet identified special needs;
8. Invoke the authority of the juvenile or family court in situations where there is risk to the children should they remain at home, or where there is active resistance to child protective intervention.

OPERATIONAL STANDARDS

1. Administrative Commitment - Informed, Understanding Support

Administration of the CPS agency at the policy-making level must recognize and support the validity and importance of child protective services as a specialized social service. An effective program requires a full commitment at the highest level to the responsibility to provide protective services for all children who are reported to be in danger from neglect and abuse.

Administrative and program policy must be identified with the helping, non-judgmental, non-punitive philosophy of child protective services. Management support of professional decisions in relation to child protective service cases is required even when such decisions may run counter to popular expectations or community pressure. The most effective service exists where management

from the fields of pediatrics, law, psychiatry and psychology must be available to the CPS worker and supervisor. Interdisciplinary review and consultation enhances the child protective worker's knowledge and perception of family interaction and development.

Where diagnostic evaluation indicates that court intervention is required, special legal consultation is crucial to the agency's responsibility to prepare the case for presentation in court. Legal services include assistance to the worker in reviewing the case record, interviewing witnesses and drafting the court petition.

Consultation and collaboration with school, health, law enforcement and other professional personnel must be encouraged when the family receiving protective services comes into contact with the variety of agencies and services in the community.

6. Availability of Community Resources

Protection of children is a community responsibility and as such cannot be totally vested in a single service. All of the standards discussed are based on a need to develop and maintain a system of support for families.

Abuse and neglect of children is a result of parental failure, inadequacy and family breakdown. Many sources serve to alleviate family stress, to prevent further problems and to strengthen family functioning. Under any of a variety of auspices, resources must be available to the CPS agency to augment the protective function. Day care, foster care, hotline, homemaker services, visiting nurses, crisis nurseries, family life education, family casework, marriage counseling, mental health services, public health programs, vocational training, income maintenance, housing assistance, school social work, parent discussion and self-help groups are examples of the essential network of services to families and children.

7. A High Quality of Supervision - More than Administrative Control

Many critical decisions must be reached in case management of child protective services. CPS supervisors must have thorough knowledge, experience and skill in child protective services to provide administrative support to CPS workers, share responsibility for treatment decisions and ensure that decisions made are professional decisions. The supervisor plays an important role in the process of assessment of treatment potential, evaluation of risk, review of case planning, involving the authority of the court, deciding to increase or terminate agency services and the continuing in-service training of CPS workers.

8. The CPS Worker - Not a Job for Everyone

CPS workers require careful selection, rigorous training, and continuous support and supervision. It is a job which requires qualities, attitudes and training suited to its special demands and pressures. The following are desirable qualities and characteristics of the successful CPS worker:

- Emotionally mature and stable;
- Sensitive to people and problems of family life;
- Capable of dealing constructively with crisis and able to work under pressure;
- Tolerant, patient and non-judgmental in the face of child abuse and neglect;
- Well organized and direct;
- Able to use authority constructively without becoming authoritarian;

- Committed to the concept that most people can be helped to change;
- Unthreatened in the face of hostility and resistance;
- Convinced of the validity of child protective services; and
- Able to acquire additional knowledge and skill through experience and training.

9. Flexibility in Staff Scheduling - Not a 9 to 5 Job

Effectiveness in CPS requires 24-hour service, reaching out to parents, special efforts to involve both parents and the necessity of arranging interviews suited to the needs of the family rather than the usual needs of agencies.

CPS deals with families which have not sought help. Interviews with them, therefore, must be planned at times most convenient to the family as opposed to the more usual social work client who recognizes his need and seeks help.

CPS requires a heavy number of after-office-hours interviews, and schedules must be flexible to allow for these factors.

10. Continuing In-Service Training - A Designed Program

In addition to the supervisory role in worker development, organized training which focuses on new ideas, innovations, approaches, materials and research is necessary. Successful programs recognize the importance of setting aside a specific amount of time for planned training activities. Such training increases program effectiveness as well as worker productivity and morale.

11. Good Salaries - Quality Service Is a Total Savings

Because of the special skills and high responsibility required in child protective services and in order to avoid costly turnover of personnel which disrupts program effectiveness, the CPS worker must be provided with a prime salary and position classification in addition to other resources and benefits.

12. Community Support for Getting the Job Done

The CPS agency must maintain a continuing program of community relations aimed at interpreting child protective services to the community, promoting identification of children in need of protection and maintaining clear lines of responsibility with hospitals, law enforcement, juvenile court and other social services.

There must be a community advisory team to assist the agency in achieving and maintaining standards. The team should review services and needs and make recommendations, develop policy recommendations and assist in interpreting the services of the agency to the community and the expectations of the community to the agency.

Presented here in capsule form, these standards have been the subject of much broader discussion and definition over the years. Out of our consultation and training in communities has come the need for a brief, concise statement upon which communities can measure their program and its relationship to national standards. American Humane offers consultation, training and program evaluation to communities based upon these standards.

The American Humane Association